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ABSTRACT

Intended as a resource manual for speech and language clinicians, the booklet addresses specific elements of speech improvement and language development programs for children with difficulties in those areas. An overview of professional literature regarding such programs is provided, focusing on such aspects as program definition and purpose, target groups, organizational models, class size, teacher training, and program efficacy. The delivery of services through speech improvement/language development programs is discussed in terms of such aspects as target groups, organizational models, identifying needs, and program components. Two organizational models for such programs are described (the direct service model and the team teaching model), and current programs utilizing each approach at various levels are reviewed. Included in the appendixes are descriptions of language screening/diagnostic tests and materials for speech improvement/language development, and sample forms for an individual education plan and a group instructional plan. (DLS)

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Speech Improvement Language Development Programs

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1978

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Introduction

During the 1976-77 academic year, statistical information provided by clinicians in the public schools indicated that approximately 6,460 pupils were receiving services through Speech Improvement/Language Development programs. The programs are operational in at least sixty (60) of the ninety-two (92) local education agencies and approximately three hundred sixteen (316) of the three hundred forty-eight (348) clinicians provide services through this model. The authority for the establishment of Speech Improvement/Language Development Programs was provided through the *Procedures for Survey, Screening, Evaluation, Placement and Dismissal of Pupils Into/Out of Programs for the Handicapped.*

The opinions of professionals in the field of Speech Pathology are diverse relative to the various aspects of Speech Improvement/Language Development. It appeared, however, that with the number of Speech Improvement/Language Development Programs operational within the state there was a need for a publication to address specific elements of these programs. The present publication has been developed in an effort to provide a resource manual for Speech and Language Clinicians who are engaged in providing services through this model. It is the sincere hope of the State Department of Education that this publication will be of benefit to clinicians in the public schools.

The author is most appreciative of the information submitted by clinicians for use in the publication. This information was particularly helpful in the development of Unit III.

Unit I
Speech Improvement/ Language Development Programs: An Overview of Professional Literature

The author utilizes the terminology "Speech Improvement/Language Development" throughout the present publication to identify a service delivery model in which activities related to developing and improving speech and language skills are provided to large groups of pupils. This term was selected because of the intrinsic relationship between speech and language. In much of the literature, however, the term "speech improvement" is utilized in reference to this service delivery model with less emphasis being placed upon the "language development" component; the omission of the latter term may be related to the fact that the majority of the literature describing "speech improvement" as a service delivery model was published prior to the early sixties. However, in recent years the inextricable relationship between "language" and cognitive development, psychosocial adjustment, and educational achievement has attained prominence among speech pathologists and educators, as evidence by the voluminous amounts of information currently available regarding various aspects of language.

A review of professional literature in the field of Speech Pathology indicated that Speech Improvement/Language Development Programs are frequently utilized as a service delivery model. While there are numerous articles and publications which relate to activities and materials for use in these programs, there is a paucity of information describing organization, administration, content, and other specific aspects of these programs. Garrison, Darley, Amidon and Breinholt (1961), drew similar conclusions subsequent to a review of information compiled by Lysaght (1960), who abstracted two hundred fifteen (215) books and articles from 1946 through 1960. They reported that although information was available regarding some aspects of speech improvement, there was little information relating to "organization and supervision of the program, preparation of personnel, and evaluative criteria" (page 79).

In the following sections of the unit, pertinent information is provided with regard to various aspects of Speech Improvement/Language Development programs which should be of assistance to clinicians. Owing to the lack of information available regarding specific areas of concern to the author, it was necessary to rely on a limited number of articles in developing the present publication.

DEFINITION/PURPOSE

Garrison, et. al., referring to the definition and purpose of speech improvement, indicated that there had been "no published statement reflecting general agreement on its purpose, scope and relation to other phases of the curriculum" (page 78); the present author also noted these deficiencies in the literature. The following represents a digest of some of the stated definitions and purposes of speech improvement which have been utilized by various authors/researchers in past years:

"Speech improvement is that type of speech therapy which is given to all children in a grade...Speech Improvement is taught as a regular school project, and is as much as possible integrated with reading, language and spelling into the regular curriculum of a school system." (Roe and Milisen, 1942, page 42)

"...group work done with whole classes or grades at one time. The objectives are to raise the general speech peformance of the group and to minimize or correct minor defects of some of the individuals in the group." (Ainsworth, 1948, cited by Wilson, 1954, page 4)

"...be purposeful and have direct goals. It would consist of group training whole classes or grades at one time. Its objectives would be to raise the general standards of speech performance for all, to correct the minor defects of some, and to minimize such serious defects as may be present in others." (Black, 1956, page 3)

"It consists of systematic instruction in oral communication which has as its purpose the development of articulation, voice, and language abilities that enable all children to communicate their ideas effectively. Speech improvement is not concerned with the work of the speech clinician with speech-and-hearing handicapped children outside of the regular classroom." (Garrison, et. al., page 78)

The definition/description of Speech Improvement/Language Development programs which appears most compatible with this author's philosophy is outlined in *Project UPGRADE: Model Regulations for School Language, Speech and Hearing Programs and Services,* (ASHA, 1973). The following information (page 7) is provided under the "Development" component of the continuum of services:

Population Served

1. All pupils in regular or special education classes.

Program Goals

1. Provide prevention-oriented, sequenced curriculum activities to help pupils develop communicative behaviors in appropriate social, educational and cultural contexts.
2. Provide information and assistance to other participants.

Services Provided by Language, Speech and Hearing Specialists

1. Identification
2. Assessment and Evaluation of Communicative Skills
3. Referral (for additional services)
4. Parent Counseling and Instruction
5. Pupil Counseling and Placement
6. Teacher Counseling and Inservice Orientation/Instruction
7. Demonstration Lessons
8. Program Evaluation

9. Consultation (for individual pupils or groups)
10. Research

Program Types and Alternatives

1. Regular classroom placement with
   a. Supportive services from other participants
   b. Home or hospital services
   c. Parent/Infant Instruction

Other Participants (most common)

1. Parents
2. Teachers
3. Administrators
4. Aides
5. Counselors
6. Curriculum Specialists

The author basically supports the content of the preceding outline and its implications for the provision of services through Speech Improvement/Language Development programs. In subsequent units of the present publication the author offers an expanded definition, purpose, and target groups for Speech Improvement/Language Development programs.

TARGET GROUPS

In terms of target groups, most of the Speech Improvement/Language Development programs described in the literature were conducted primarily for pupils in kindergarten through second grade. (Wilson, 1954; Sommers, Cockerille, Paul, Bowser, Fitcher, Fenton and Copetas, 1961; Sommers, Copetas, Bowser, Fichter, Furlong, Rhodes and Saunders, 1962). The study by Garrision et. al. was conducted in nine school systems, located throughout the nation, which were known to have well-organized speech improvement programs. The following information was obtained from a questionnaire completed by two hundred forty-five (245) teachers, clinicians and supervisors of speech/hearing programs:

1. 45% of the teachers reported that speech improvement programs were provided in kindergarten and first grade.
2. 13% of the teachers reported that speech improvement programs were provided in second grade.
3. 7% of the teachers reported that speech improvement programs were provided in grades three and four.
4. 6% of the teachers reported that speech improvement programs were provided in grades five and six.
5. 1% of the teachers reported that speech improvement programs were conducted in seventh grade.

6. Clinicians and supervisors of speech/hearing programs were in agreement that services provided in speech improvement programs were concentrated in kindergarten and primary grades; however, 9% of the clinicians and 12% of the supervisors of speech/hearing programs reported that the programs extended from primary through secondary levels.

Most of the professional literature related to the provision of services through Speech Improvement/Language Development programs for pupils served in regular programs. Some authors/researchers (Freeman and Lukens, 1962; Coston, Weiss, and Easterling, 1962; Project Upgrade, 1973; and Van Hattum, 1976), however, related to the provision of services through this model for pupils in special education programs.

It would seem that Speech Improvement/Language Development programs are viable service delivery models for pupils in kindergarten through secondary grades, including pupils enrolled in special education programs. Further information regarding potential "target groups" appropriate for inclusion in Speech Improvement/Language Development is contained in Unit II of the present publication.

ORGANIZATIONAL MODELS

From a review of the professional literature, it appears that there are a variety of organizational models which are appropriate for service delivery through Speech Improvement/Language Development programs. Most authors/researchers such as Wilson (1954); Van Riper and Butler (1955); Garrison, et al (1961); Ainsworth, Anderson, Curtis, Jones, McLean, Van Hattum and Bingham (1964); ASHA (1963) described programs in which the role of the clinician was primarily consultative. Others, such as Gordon et. al. (1960); Sommers, et. al. (1961); Garrison, et. al. (1961); Freeman (1962) relate to programs in which clinicians and teachers actively participate in providing services through Speech Improvement/Language Development programs. A few authors/researchers (Garrison, et. al.) discuss programs in which the clinician assumes the primary responsibility for providing the Speech Improvement/Language Development program.

Garrision et. al. reported that 11% of the persons providing direct services in Speech Improvement programs were clinicians and that 80% were teachers. In response to a questionnaire relative to whether or not speech improvement should be provided directly by the clinician and/or supervised, the results indicated the following (p. 89).

1. 16% of the respondents indicated that clinicians should "teach only".
2. 41% of the respondents indicated that clinicians should "supervise only".
3. 40% of the respondents indicated that clinicians should both "teach and supervise" these programs.

A comparison of the information gathered nationally and the trends for respondents representing the Southeast were similar; however, it appears that the majority (56%) of the clinicians in the Southeast favored "supervison only" in terms of an organizational model.

An analysis of the research supports the contention of the author that there are a variety of organizational models which may be appropriate for delivery of services in Speech Improvement/

Language Development programs. The taxonomies selected by the author to identify the organizational models utilized most frequently by clinicians in the South Carolina schools include the (1) Direct Service Model, (2) Team Teaching Model and (3) Consultant Model. These models are discussed in greater detail in Unit II.

CLASSROOM-BASED VS. OTHER-THAN-CLASSROOM-BASED-APPROACHES

Garrison, et. al. obtained information from clinicians relative to the relationship between speech improvement programs and the speech/language program. The following results were obtained:

1) 35% of the supervisors of speech/language programs indicated that speech improvement programs were part of remedial speech and hearing services.
2) 21% of the supervisors of speech/language programs reported that speech improvement programs were part of language arts.
3) 5% of the supervisors of speech/language programs indicated that speech improvement programs were separate from speech/language services as well as other programs.
4) 6% of the supervisors of speech/language programs reported that speech improvement programs were part of remedial services and language arts.
5) 30% of the supervisors provided no response.

This information tends to support the author's opinion that Speech Improvement/Language Development programs may be either "classroom-based" or "other-than-classroom-based". The setting of the program depends upon the needs of the pupils and target groups for whom services are to be provided. Unit II provides additional information regarding "classroom-based" and "other-than-classroom-based" programs.

LENGTH/FREQUENCY OF SESSIONS

A review of professional literature indicated that the length of Speech Improvement/Language Development sessions varies from five minutes to an hour with the frequency ranging from one to five weekly sessions (Wilson, 1954; Gordon, 1961; Garrison et. at., 1961; Sommers, et. al., 1961 and 1962). Garrison, et. al., reported the following results from their survey:

1) 17% of the respondents reported sessions up to 14 minutes in length
2) 43% of the respondents reported sessions ranging from 15 to 24 minutes in length.
3) 14% of the respondents reported sessions ranging from 25 to 34 minutes.
4) 6% of the respondents reported lengthier sessions.

Information obtained from clinicians in the South Carolina schools, who are engaged in the provision of services through Speech Improvement/Language Development programs, indicated that the length of sessions varies from fifteen to fifty minutes. Reportedly, the frequency ranges from one to five sessions weekly. The length and frequency of contacts with pupils in Speech Improvement/Language Development programs will depend upon the purpose and the target groups receiving services through this model.

CLASS SIZE

According to the literature, Speech Improvement/Language Development classes ranged in number from five (5) to thirty (30) pupils (Wilson, 1954; Gordon, 1960; and Sommers, et. al., 1961 and 1962). The survey by Garrison, et. al., (1961) indicated that the average class consisted of approximately twenty-two (22) pupils. That this trend still exists is evidenced by information obtained from "Statistical Summary" reports completed in May, 1976, by Speech/Language Clinicians in the South Carolina schools; these reports indicated that class size for Speech Improvement/Language Development programs ranged from five (5) to thirty-five (35) pupils, and that the average class consisted of twenty-one (21) pupils. The number of pupils served in Speech Improvement/Language Development programs will depend upon the purpose and target groups receiving services through this model.

CONTENT/CURRICULUM

In most of the early research, the content of speech improvement programs consisted primarily of activities related to improving articulatory proficiency (Wilson, 1954; Garrison et. al., 1961; Gordon, 1961; and Sommers, et. al., 1961 and 1962). In more recent publications, however, there appears to be less concensus of opinion in terms of the specific content of formal Speech Improvement/Language Development programs. This may be attributed to the recognition of individual differences among pupils with reference to cognitive, cultural, and socio-economic factors. In generalizing a statement by Van Hattum (1976), the best specific content (of language development programs for mentally handicapped) is not known.

TEACHER TRAINING

Garrison et. al., in describing "A Model Program", report that it may be necessary to provide in-service training to teachers over a period of two to three years, contingent upon the preparation and experience of those involved. After the programs are operational, they suggest that training may be limited to teachers who are new to the school district. In-service training as described by Garrision, et. al., would include a series of workshops and demonstrations conducted by clinicians during the year; through periodic conferences, the clinician would assist teachers in integrating Speech Improvement/Language Development with classroom activities. These authors contend that it would be beneficial for administrators to permit teachers to attend workshops and conferences oriented toward developing the speech and language skills of pupils.

EFFICACY OF SPEECH IMPROVEMENT/LANGUAGE DEVELOPMENT PROGRAMS

A study of the effects of a speech improvement program for pupils in kindergarten conducted by Wilson (1954) indicated that there was a reduction in the mean number of errors for the sounds included in the program. Secondly, it appeared that generalization occurred since there was a reduction in the mean number of errors for sounds not included in the program. Wilson, however, reported that no significant improvement was noted in reading readiness scores as a result of the program.

Sommers, et. al., (1961) studied the effects of 1) speech therapy, 2) speech improvement and 3) a combination of speech therapy and speech improvement upon a group of first graders with articulatory defects. Their conclusions were that while speech improvement is significant in improving articulation, weekly speech therapy improved articulation significantly more than a comparable period of speech improvement. Similar conclusions were reached in earlier studies by

Ludwig (1955) and McIntyre (1958). In a follow-up study, Sommers, et. al., (1962) compared the effectiveness of sixteen weeks of speech improvement with nine months of speech improvement on the articulatory proficiency of pupils in first grade. While both durations effected improvement in articulation, speech improvement provided for nine months produced significantly greater results. In a second experiment, it was determined that an additional eight weeks of speech improvement provided for pupils in second grade who had previously received nine months of speech improvement in first grade, did not result in any greater improvement in articulation.

Gordon (1960) conducted a study on speech improvement with a group of third grade pupils utilizing a combination of television and classroom instruction. The purpose of the study was to determine whether dialectal articulation defects among Hawaiian school children would be significantly improved through a group television classroom speech improvement program. The experiment was conducted over a nine week period of time and pupils demonstrated significantly fewer errors at the end of the program. In a more recent study, Trullinger (1976) conducted a language development program for first graders utilizing video tape playback. He concluded that language concepts can be taught effectively to large groups of pupils through this approach.

In response to a questionnaire developed by Garrison, et. al., regarding the effects of speech improvement, teachers and clinicians provided the following information:

TABLE II

Question	Response			
	Yes	To A Limited Extent	No	No Response Or Don't Know
Does speech improvement help students develop good speech, voice and language patterns?	67%	23%	0%	10%
Does it help students correct minor speech and voice problems?	64%	24%	3%	9%
Does it help students express ideas ideas clearly?	57%	31%	2%	10%

The responses noted in the preceding survey support the author's contention that speech improvement programs can be effective in "preventing" certain speech/language disorders, as well as in "remediating" minor defects.

Freeman (1960) described a speech improvement program for Educable Mentally Handicapped pupils in which speech and language development was incorporated as part of the curriculum. He stressed the importance of speech and language as aspects of the total educational program, which are necessary in order to increase the social competence of mentally handicapped children.

Research measuring the effectiveness of formal Speech Improvement/Language Development programs with Educable Mentally Handicapped pupils appears to be limited and somewhat contradictory. Coston, et. al., (1972) described a speech improvement program which was

conducted by Shubert, Vanden, Heuvel, and Fulton (1966). The program was presented daily for 15 minutes over a period of thirty-five (35) weeks; the results indicated that articulatory improvement occurred for both the control and experimental groups and that no significant differences occurred in post-test data. In a modified replication of the Shubert, et. al. (1966) study, Shubert, Jansen and Fulton (1967) found significant differences between pre and post-test data; however, no significant differences were noted between the experimental and control groups. A recent study related to language development was conducted by Alson and Swidler (1976) with institutionalized Educable Mentally Handicapped adolescents; informal evaluations by staff members supported the efficacy of the program, and it appeared that the pupils demonstrated considerably greater facility in language development by the end of the program.

It should be noted that most of the studies previously described, were conducted with institutionalized mentally handicapped pupils. In a study by Potter (1964), retarded pupils demonstrated greater gains in articulation when speech therapy was provided in mixed groups with normal pupils than when served in a homogenous group of mentally handicapped pupils. In view of this, the results of studies conducted with mentally handicapped pupils enrolled in Speech Improvement/Language Development programs in public schools may yield more significant results than those conducted with institutionalized retarded pupils.

Although much of the literature is related to programs of "speech improvement" rather than "language development," the research tends to support the efficacy of these programs. In the opinion of this author, the effectiveness of formal Speech Improvement/Language Development programs for both normal and handicapped pupils is worthy of further investigation.

Unit II
Delivery of Services Through Speech Improvement/ Language Development Programs

In the present publication, the term "Speech Improvement/Language Development" refers to speech and language services which are formally provided to:

(1) Entire classes of pupils (regular or special education) or large groups of pupils (more than four) within a classroom setting, or

(2) Large groups of pupils who are removed from regular or special education classes for instruction.

The major goal of Speech Improvement/Language Development programs, as described in the present publication, is to facilitate the development and maintenance of maximum communication skills for all pupils from kindergarten through secondary school, including pupils in special education programs. As previously noted in the Introduction of the present publication, the *Procedures for Survey, Screening, Evaluation, Placement and Dismissal of Children Into/Out of Programs for Handicapped* approved by the State Board of Education establishes the authority for Speech Improvement/Language Development programs. These programs are considered viable components of speech and language programs/services provided for pupils from kindergarten through secondary school age.

TARGET GROUPS

Pupils enrolled in Speech Improvement/Language Development programs may include, but are not limited to the following:

(1) Pupils enrolled in public school kindergarten programs and grades one through three.

Rationale:

Stimulation in speech and language during these early years will afford an opportunity for pupils to develop adequate speech and language skills precluding the stabilization of unacceptable patterns of speech.

(2) Pupils served in programs for the handicapped and otherwise normal pupils exhibiting speech/language handicaps who are also enrolled in speech/language therapy programs.

Rationale:

These pupils require continuous reinforcement of appropriate speech and language behavior in order to effect improvement in speech and language performance.

(3) Pupils whose speech and language development is delayed (less than one year) who are not appropriately classified as "speech/language handicapped".

Rationale:

Stimulation will enhance opportunities for academic achievement and reduce the possibility that further language delay will occur.

(4) Pupils whose primary language is other than English and who have not gained proficiency in standard English.

Rationale:
Stimulation will help in developing the communication skills necessary for academic achievement and social interaction.

(5) Pupils who exhibit dialectal differences, with reference to standard English.

Rationale:
Stimulation will afford pupils an opportunity to acquire proficiency in standard English, which is the most commonly accepted form of communication among the English speaking population. An approach of teaching English as a second language would enable pupils to retain their cultural heritage.

ORGANIZATIONAL MODELS

The taxonomy utilized to identify Speech Improvement/Language Development program models are descriptive and were selected in reference to the degree to which the clinician is involved in the delivery of services.

(1) Direct Service Model
In this model, a speech/language clinician provides direct services to pupils. These services may be (a) classroom based, where services are provided to an entire class, or specific pupils within the regular/special education classroom setting or, (b) other-than-classroom based, where services are provided for groups of pupils who are removed from a regular/special education class setting and served by a speech/language clinician for designated periods of time.

(2) Team Teaching Model
In this model, a speech/language clinician works conjointly with teachers to provide services to an entire class or specific groups of pupils. The team-teaching model may be (a) classroom based where a clinician and a regular/special classroom teacher and/or other specialists work as team members to provide Speech Improvement/Language Development activities in the regular/special education class setting, or (b) other-than-classroom based where a clinician and teacher specialist, i.e., reading teacher, work as members of a team to provide Speech Improvement/Language Development activities to pupils outside of the regular or special education class setting.

(3) Consultant Model
In this model, a speech/language clinician serves as a consultant to regular/special education teachers who provide direct services to the entire class, or with specific pupils within a regular/special class setting.

As indicated in the overview of organizational models previously described, the roles and responsibilities of the clinicians and teachers in providing Speech Improvement/Language Development programs will vary depending upon the organizational model selected. In Unit III, each organizational model for Speech Improvement/Language Development will be reviewed in greater detail.

IDENTIFYING NEEDS

While Speech Improvement/Language Development programs designed for certain categories of pupils (entire classes of pupils in kindergarten and primary grades) may be routinely established, the clinician may wish to identify needs for Speech Improvement/Language Development programs relative to other categories of pupils. The following procedure should be helpful in identifying needs:

(1) Analyze pertinent data such as,
   a. the results of screening to determine if there are specific schools, grades, or classes where pupils recommended for re-screening are concentrated.
   b. the results of speech/language evaluations to determine if there are specific schools, grades or classes where pupils exhibiting speech/language disorders are concentrated.

(2) Consult with various school personnel who may have pertinent information such as,
   a. building principals, who would be able to provide information regarding specific schools, grades or classes where reading scores, academic achievement scores, etc. appear significantly depressed.
   b. teachers, who would be able to provide information regarding areas of strengths and deficits of pupils from the standpoint of classroom performance.
   c. coordinators of programs for the handicapped or school psychologists, who would be able to provide information regarding handicapped pupils enrolled in programs.

COMPONENTS OF SPEECH IMPROVEMENT/LANGUAGE DEVELOPMENT PROGRAMS

Selecting an Appropriate Model

The model to be utilized should be selected from the standpoint of the most effective and efficient means of providing services relative to the identified needs of the pupils and subsequently, the target groups selected for inclusion in the program. While each of the models may be appropriately utilized with each of the target groups previously described, there are a number of discreet variables which warrant consideration in the selection of a model; these include the following:

(1) The total number of pupils who would benefit from a Speech Improvement/Language Development program.

(2) The nature and extent of the services to be provided, i.e. prevention-oriented programs, programs for pupils exhibiting dialectal differences, etc.

(3) The total number of clinicians in the district and the availability of time with regard to the responsibilities inherent to serving speech/language handicapped pupils.

(4) The degree of interest and cooperation exhibited by teachers relative to their involvement in these programs.

(5) The knowledge and skills demonstrated by participating teachers relative to speech/language development.

Teacher Training

The element of in-service training for teachers is important to the effectiveness of speech and language programs and particularly in reference to the success of Speech Improvement/Language

Development programs where teacher involvement is increased. An in-service training program for teachers may include information in the following areas:

(1) Normal speech/language development and developmental schedules.

(2) A description of the nature and type of the various speech/language disorders.

(3) An overview of dialectal differences and the educational implications

(4) Suggestions for the teacher for follow-up work as related to each specific disorder.

(5) An overview of the speech/language program and its relationship to the educational program.

For teachers who will be actively involved in Speech Improvement/Language Development programs, the in-service program may be expanded to include:

(1) A description of the services provided in Speech Improvement/Language Development programs.
   a. Purpose
   b. Target Groups
   c. Organizational Models

(2) Roles and responsibilities of teachers/clinicians with respect to the various models for Speech Improvement/Language Development.

(3) Formulating measurable goals and objectives for pupils receiving services through Speech Improvement/Language Development programs.

(4) Developing instructional/educational plans.

Assessment

In-depth evaluations utilizing diagnostic tests are not required for pupils served in Speech Improvement/Language Development Programs, unless these pupils are simultaneously enrolled in the therapy program. The speech/language clinician should determine the nature and extent of the assessment necessary for planning an effective program. In many cases, the assessment will consist of screening instruments for speech/language, performance inventories and informal measures. Additional information may be obtained from the results of readiness tests, achievement tests, and group intelligence tests, etc., administered by teachers or tests administered by psychologists and other appropriate specialists.

Depending upon the specific Speech Improvement/Language Development program model to be utilized, the teacher may actively participate in the assessment process. Clinicians, however, should assume responsibility for assessing areas specifically related to their expertise, i.e., articulation, voice, fluency. The results of the assessment should provide information relative to the speech/language proficiency of each individual pupil, and because of the nature of these programs, information regarding the overall group performance as well as individual pupil performance may also be efficacious in terms of program planning.

In certain instances, an in-depth speech/language assessment may be warranted. For example, State Board of Education criteria for enrolling a pupil exhibiting delayed speech or language in a therapy program requires that the pupils' communication scores be depressed at least one year

developmentally. Suppose then, that in a kindergarten class, two pupils exhibit similar developmental articulation errors; however, following a language screening, one pupil's language scores appear commensurate with the chronological age, while the other pupil's language scores appear ten months below the chronological age. In all probability, the clinician would consider it important to obtain additional information regarding the language skills of the pupil who exhibited depressed language scores and, therefore, administer tests which would measure specific aspects of language. The information obtained through an in-depth assessment would enable the clinician to develop activities for inclusion in the Speech Improvement/Language Development program which are specific to the pupil's areas of deficit. Should the clinician determine that the pupil exhibits a speech/language handicap, the pupil may then be enrolled in therapy program and perhaps receive instruction through a Speech Improvement/Language Development program simultaneoulsy.

A list and brief description of language screening/diagnostic instruments which may be appropriate for assessing language proficiency prior to the enrollment of a pupil in a Speech Improvement/Language Development program are included in Appendix A. For information regarding screening/diagnostic tests of Articulation, refer to *Articulation Disorders: A Guide to Program Administration and Case Management for Speech Clinicians in Public Schools* (Ginn, 1976).

Parent Involvement

When a Speech Improvement/Language Development program is provided within a classroom setting (regular class or special education class) for the entire classroom setting, it is not necessary to adhere to formal "due process" procedures in order to provide these services. It may be prudent, however, to obtain parent permission when pupils are removed from the classroom setting for participation in a Speech Improvement/Language Development program, although the pupils may not necessarily be considered "speech/language handicapped." When parent permission is necessary, it may be obtained by means of telephone/written communication, or through conferences conducted by teachers/clinicians. Information regarding the nature and purpose of the program, the rationale for enrolling the pupil, the content of the program, and an explanation of the frequency and length of sessions should be provided to the parents.

Parent involvement in the planning of these programs and in providing follow-up work in the home environment should be encouraged. Through mechanisms such as conferences and workshops regarding Speech Improvement/Language Development, parents may become actively involved. Since parents serve as "models" for child learning, it is generally agreed that the quality of communication skills demonstrated by parents is important to the development of these skills in children. Parent participation in many cases is vital to the success of these programs.

Formulating Instructional Goals/Objectives

Based upon the needs of individual pupils as indicated by the assessment, and the overall needs of the group as determined by a comparison of the results of individual pupil assessment, appropriate instructional goals and objectives can be developed. Depending upon the needs of the pupils and the type of Speech Improvement/Language Development program model utilized, goals and objectives may be developed for each individual pupil served within the Speech Improvement/Language Development program, or the goals and objectives may be "group-oriented". When group goals are formulated, however, the needs of individual pupils who exhibit

specific areas of deficit should be given special consideration and progress should be measured for all pupils on an individual basis.

"Goals" are the long-range, terminal behaviors/performance established for pupils on the basis of the results of assessment, while "objectives" relate to the series of short-term, sequentially developed steps which, when accomplished, lead to the ultimate accomplishment of the stated goals. It is imperative that goals and objectives be measurable in order to evaluate the effectiveness of the Speech Improvement/Language Development program. Measurable goals and objectives include the following components (adapted from Grimes and Dublinske's *Program Planning and Evaluation* (PPE) model cited in the *Program Planning, Development and Management and Evaluation Manual (ASHA, 1973).*

WHAT is the desired outcome?

WHEN will the desired outcome be accomplished?

WHO will provide the means to accomplish the desired outcome?

TO WHOM is the desired outcome and the means for accomplishment directed?

CRITERION that will indicate accomplishment.

EVALUATION to determine if the desired outcome has been accomplished.

An example of a typical "goal" for pupils exhibiting dialectal differences related to Black dialect who are enrolled in a Speech Improvement/Language Development program may be similar to the following:

[By May 31, of the 1977-78 school year,] [ninety percent]
When Criterion

[of the pupils exhibiting dialectal difference, who are
To Whom

enrolled in the Speech Improvement/Language Development program]

[conducted by the clinician/teacher,] [will improve expressive
Who

language skills in the pronunciation/grammatical features
What

appropriate in the usage of standard English] [as measured by

a pre-post criterion test requiring oral responses.]
Evaluation

Objectives established for pupils in meeting the stated goal may be similar to the following:

(1) By October 1, 1977, 90% of the pupils participating in the Speech Improvement/Language Development program will be able to utilize the indefinite articles "a" and "an" correctly in contexts appropriate to standard English, as measured by a performance test presented orally by the clinician/teacher.

(2) By November 1, 1977, 90% of the pupils participating in the Speech Improvement/Language Development program will be able to produce the consonant blends "sk" and

"str" correctly in contexts appropriate to standard English as measured by a performance test presented orally by the clinician/teacher.

(3) By December 1, 1977, 90% of the pupils participating in the Speech Improvement/Language Development program will be able to utilize the plural forms of words correctly in contexts appropriate to standard English, as measured by a performance test presented orally by the clinician/teacher.

(4) By January 15, 1978, 90% of the pupils participating in the Speech Improvement/Language Development program will be able to utilize possessive forms of nouns and pronouns correctly in contexts appropriate to standard English, as measured by an oral performance review presented orally by the clinician/teacher.

Depending upon the performance level of the group in terms of initial baseline performance, objectives may need to be broken down into more minute steps. For instance, the "what" of objective #4 may need to appear as several separate objectives, smaller steps might include: 1) ...utilizing the possessive forms of singular pronouns correctly, i.e., his, hers, my, mine, 2) ...utilizing the possessive form of plural pronouns, i.e., our, ours, their, theirs, 3) ...utilizing the possessive form of singular nouns correctly, i.e., baby's book, girl's dress, etc.

Developing Individualized Education Plans (IEPs)

In cases where identified speech/language handicapped pupils are selected for inclusion in a Speech Improvement/Language Development program, clinicians/teachers in concert with parents of Speech/Language Handicapped pupils must develop an Individualized Education Plan (IEP) for each pupil. The IEP should reflect all services to be provided to the pupil and must contain the components outlined in South Carolina's *Amended Annual Program for Fiscal 1978 Under Public Law 94-142, Part "B" of the Education of All Handicapped Children Act* adopted by the South Carolina Board of Education and approved by the Bureau of Education for the Handicapped. These components and an explanation of their relationship to programs for speech/language handicapped pupils include the following:

(1) The present levels of educational performance of each pupil. This refers to a description of the pupil's level of speech/language performance based upon the results of assessment.

(2) Annual goals for each pupil. (previously described)

(3) Short-term instructional objectives for each pupil. (previously described)

(4) The specific educational services to be provided to each pupil and the extent to which each pupil will be able to participate in regular educational programs. This refers to a description of (1) speech/language services required to meet the unique needs of pupil, (2) strategies/techniques and activities utilized, and (3) any special media, materials and equipment needed. The plan additionally, should state the specific type of speech/language handicap, the specific model recommended (i.e., individual therapy or group therapy), and the length/frequency of therapy sessions.

(5) The projected date of initiation and anticipated duration of services. This refers to the projected starting and ending date of services to be provided for each pupil.

(6) Appropriate criteria, evaluation procedures and schedules to determine, at least on an annual basis, if objectives are being achieved. The evaluation of the IEP shall be in consonance with the stated goals and objectives and must reflect the degree to which these goals and objectives have been attained. The IEP should be reviewed as warranted by the pupil's progress.

A sample Individualized Education Plan for pupils in Speech Improvement/Language Development programs is included in Appendix C, Form I. The plan was developed by the clinicians participating in the Lake Greenwood Project; objectives and activities specified in the plan are based upon the *Goldman-Lynch Sounds and Symbols Program.*

Developing Group Instructional Plans

In cases where pupils enrolled in Speech Improvement/Language Development, are not appropriately classified as speech/language handicapped, as defined in the *Procedures for Survey, Screening, Evaluation, Placement and Dismissal of Children Into/Out of Programs for the Handicapped* and are not counted for funding purposes, it may be more efficient to develop a Group Instructional Plan. These plans would consist of activities which address a composite of the areas of weakness demonstrated by individual pupils within the group and additional actitivities as deemed appropriate by the clinician/teacher. The format of these plans may vary depending upon the organizational model selected and the individual preferences of clinicians/teachers. If pre-post-testing is provided, the effectiveness of the program could be measured in terms of the progress of individual pupils as well as the progress of the group. An appropriate format for a Group Instructional Plan is included in Appendix C, Form II.

Content

The specific content of Speech Improvement/Language Development programs will vary depending upon the purpose of the program, the target groups served and the type of model selected. Materials and programmed approaches which may be utilized for Speech Improvement/Language Development programs are described in Appendix B of the present publication. For materials specific to the "speech improvement" aspect of these programs, refer to Appendix D in *Articulation Disorders: A Guide to Program Administration and Case Management for Speech/Language Clinicians in Public Schools,* (Ginn, 1976).

Unit III
Organizational Models For Speech Improvement/ Language Development Programs

As noted in the previous unit, the organizational models most frequently utilized in the South Carolina schools for the provision of services through formal Speech Improvement/Language Development programs include: 1) the Direct Service model, 2) the Team Teaching model, and 3) the Consultant model. In the present unit, various aspects of these models will be discussed and a brief overview of LEA programs representing each model will be presented.

DIRECT SERVICE MODEL

When providing Speech Improvement/Language Development programs through the Direct Service model, the program may be "classroom-based" or "other-than-classroom-based." In providing services through this model, the speech/language clinician is the person primarily responsible for planning, conducting, and evaluating the effectiveness of the program, while the responsibilities of teachers are minimal. With reference to the Direct Service model the clinician's responsibilities may include:

(1) Assessing pupils' speech/language performance

(2) Formulating goals and objectives

(3) Developing Instructional/Educational Plans
   a. Planning activities to accomplish goals and objectives
   b. Selecting and preparing materials

(4) Evaluating progress

(5) Conducting Speech Improvement/Language Development classes

(6) Facilitating parent involvement and obtaining permission for enrollment (with reference to other-than-classroom-based programs)

(7) Teacher training

(8) Developing follow-up activities which may be incorporated into the curriculum of specific subject areas for use by classroom teachers

The responsibilities of teachers include:

(1) Cooperating with the clinician in scheduling the Speech Improvement/Language Development program at a time convenient to both the clinician and teacher.

(2) Becoming familiar with the instructional plan(s) developed by the clinician.

(3) Remaining in the classroom during the scheduled sessions to assist in disseminating work sheets, materials, etc. (with reference to the classroom-based approach).

(4) Reinforcing instructional goals and objectives of the Speech Improvement/Language Development program when appropriate opportunities arise or at specified times throughout the school day.

(5) Facilitating parent involvement (with reference to the classroom-based approach.)

Strengths and Weaknesses

Strengths

The Clinician conducts the Speech Improvement/Language Development program provided through this model, therefore; the content of the program and the frequency with which sessions are conducted can be controlled. With reference to the classroom-based approach, this model provides opportunities for teachers to gain information relative to techniques, approaches and activities for Speech Improvement/Language Development programs which may later be incorporated into the classroom curriculum. Additionally, it may assist teachers in gaining insight and understanding of the importance of the clinician as a member of the educational team. The model also affords clinicians an opportunity to understand the problems faced by teachers in individualizing instruction for a large group of pupils served simultaneously.

Weaknesses

This program model may be somewhat time consuming for the clinician. Although Speech Improvement/Language Development programs are important, the clinician's primary responsibility is providing services for "speech/language handicapped" pupils. This model tends to limit teacher participation, and with reference to the other-than-classroom-based approach, it decreases opportunities for the teacher to conduct follow-up activities, unless the clinician makes a concerted effort to inform the teacher of activities which might be incorporated into the classroom setting.

LEA Programs Utilizing the Direct Service Model

The following are descriptions of programs currently operational in the state in which the Direct Service model is utilized for Speech Improvement/Language Development:

District: School District of Greenville County

Contact Person: Ms. Mary Ann Allen

Address: 301 Camperdown Way
Greenville, South Carolina 29602

Model Utilized: Direct Service Model - Classroom Based

Grade Level: Educable Mentally Handicapped - Middle School

Number of Pupils: Entire Class (12 pupils)

Frequency and Length of Sessions: Twice weekly for a period of 40 minutes each.

Rationale for Selection of Pupils: Pupils exhibited delayed speech and language associated with mental retardation.

Program Description: Prior to the Speech Improvement/Language Development program, all relevant records including psychological reports, results of achievement tests, staffing reports, etc. were reviewed. The Boehm Test of Basic Concepts, Form A, was employed as a pre-test measure at the beginning of the academic year and Form B of the test is readministered to obtain a post-test measure at the end of the year in order to measure progress.

Combining a curriculum and a therapeutic approach, several units were designed to be presented by the clinician during the year. At the time of the interview, the current instructional unit was related to "Gardening"; through this unit, pupils learned basic nouns, verbs, and adverbs associated with gardening. Additionally, the pupils were provided an opportunity to cultivate "mini-gardens". Each pupil maintained a notebook with pictures and vocabulary cards associated with various aspects of gardening. The materials needed for the unit consisted of word cards, notebooks for each child, and materials required for small scale gardening activities. Specific goals and objectives were formulated with regard to the performance level of each individual pupil and recorded in the notebook. Each pupil was responsible for accomplishing the stated goals and objectives within the projected time frames.

Positive reinforcement was provided through allowing pupils who completed objectives on schedule to actively participate in activities such as cleaning and boiling cabbage. Negative reinforcement was introduced for pupils exhibiting undesirable behaviors such as a failure to "take turns." These pupils were not permitted to actively participate, but were permitted to observe the activities of pupils who had accomplished their goals and objectives.

While the teacher did not formally participate in the program, at the appropriate times throughout the day, the activities provided during the Speech Improvement/Language Development sessions were reinforced. Both the teacher and the clinician expressed favorable opinions relative to the success of the program.

District: Charleston County Schools

Contact Person: Ms. Patti Culbertson

Address: 67 Legare Street
Charleston, South Carolina 29401

Model Utilized: Direct Service Model - Classroom Based

Grade Level: Kindergarten

Number of Pupils: Entire class (23 pupils)

Length and Frequency of Sessions: 60 minute sessions conducted three times weekly

Rationale for Selecting Pupils: The results of screening indicated a high prevalence of pupils exhibiting dialectal differences associated with a dialect frequently referred to as "Gullah". This dialect is specific to certain areas of Charleston County and in some cases, the speech of individuals exhibiting this dialect is almost unintelligible with reference to individuals who speak standard English.

Program Description: At the beginning of the school year 1) Goldman-Fristoe Test of Articulation, 2) Peabody Picture Vocabulary Test and 3) California Test of Basic Skills were administered as pre-test measures. The instructional program consisted of lessons from the *Goldman-Lynch Sounds and Symbols Kit* which were modified to the level of abilities exhibited by the children in the class. Periodically during the year, the progress of each child was monitored by providing visual

stimuli in the form of the letter representing each sound which had been introduced. If a child was unable to correctly identify the letter and/or produce the sound, the character card was presented and the child was required to produce the correct sound represented by the character. For each sound produced correctly, a star was entered on a poster containing the child's name and sound introduced. Throughout each school day, the teacher provided opportunities for reinforcement of the concepts presented by the clinician.

The teacher was supportive of the program and presented a report regarding the program during one of the teacher's meetings conducted at the school. At the end of the school year, the post-test scores were obtained and the results were charted for each pupil; a comparison of the group scores indicated that improvement in speech/language proficiency had occurred for most of the pupils receiving instruction through the Speech Improvement/Language Development program.

District: Florence School District #1

Contact Person: Ms. Betty Thomas

Address: 109 W. Pine Street
Florence, South Carolina 29501

Model Utilized: Direct Service Model - Classroom Based

Grade Level: Educable Mentally Handicapped (self-contained) - Junior and Senior High School students

Number of Pupils: Two classes consisting of a total of 19 pupils in junior high school and two classes consisting of a total of 21 pupils in senior high school

Length and Frequency of Sessions: One session weekly for a period of 45 minutes

Rationale for Selecting Pupils: The results of screening and teacher observations

Program Description: Prior to initiating the program, the clinician administered, 1) a pure tone audiometric test, 2) the Picture Articulation Test, 3) the Peabody Picture Vocabulary Test and 4) supplementary tests constructed by the clinician. Additionally, conversational speech was elicited by the clinician and tape recordings were made. The clinician obtained a copy of the language arts curriculum; portions of the curriculum which represented the areas of deficiency indicated by the assessment were selected and utilized as a basis for planning the Speech Improvement/Language Development program. A "language experience" approach was selected for the program and the activities were primarily designed to elicit oral language since the reading skills of the pupils were limited. Materials equipment consisted of vocabulary cards, action cards depicting stories, cards depicting adjectives, chalk boards and tape recorder. Specific activities were designed to assist pupils in:

(1) listening and following directions

(2) developing and expanding vocabulary

(3) differentiating between complete and incomplete thoughts

(4) speaking in complete sentences

(5) utilizing the correct verb tense

(6) utilizing singular, plural, and possive forms of nouns and pronouns correctly

(7) forming contractions

Informal tests constructed by the clinician were administered at intervals during the year in order to monitor progress.

TEAM TEACHING MODEL

In the team-teaching model, the responsibilities of the clinician and teacher should be relatively coequal; this model may be "classroom-based" or "other-than-classroom-based." Ideally, both the clinician and the teacher will participate in the majority of Speech Improvement/Language Development program components including the following:

(1) Assessing the pupils' speech/language performance

(2) Formulating goals and objectives

(3) Developing Instructional/Educational Plans

   a. planning activities to accomplish the goals and objectives
   b. selecting and preparing materials

(4) Monitoring progress

(5) Scheduling Speech Improvement/Language Development sessions

(6) Notifying parents and obtaining permission for enrollment (with reference to other-than-classroom-based programs)

(7) Conducting Speech Improvement/Language Development sessions

(8) Facilitating parent involvement

(9) Developing follow-up activities

Strengths and Weaknesses

Strengths

There are strong educational implications relative to the use of this model; it affords opportunities for clinicians and teachers to work more closely together in providing a comprehensive program. Since teachers are directly involved in planning and providing the Speech Improvement/Language Development program, it is likely that speech and language behavior will receive more attention from teachers during academic activities. Teachers also are in direct contact with pupils throughout the day and, therefore, progress can be monitored in a variety of classroom situations.

Weaknesses

The team-teaching model may be quite time consuming initially, in some instances; it may be difficult for clinicians and teachers to coordinate their schedules to allow sufficient time for developing and conducting the program.

LEA Programs Utilizing the Team-Teaching Model

The following are descriptions of programs where the team-teaching model is operational for Speech Improvement/Language Development:

District: Lee County

Contact Person: Mr. Randall Burns

Address: P.O. Box 507
Bishopville, South Carolina 29010

Model Utilized: Team-Teaching (classroom-based and other-than classroom based)

Grade Levels: first, fourth, sixth and ninth grades

Number of Pupils: 90 pupils (fifteen pupils enrolled in each class)

Frequency and Length of Sessions: four weekly sessions of 30 minutes are provided in grades 1-6 and two weekly sessions of 50 minutes are provided for students in grade 9.

Rationale for Selection of Student: Pupils who exhibit reading problems and/or dialectal differences.

Program Description: At the beginning of the program, the *Northwestern Syntax Screening Test* and a Standard English Evaluation, developed by the clinicians, is administered to serve as a pre-test measure. Speech clinicians and reading specialists alternate as team members and work conjointly with the classroom teachers to provide services in the regular class setting for pupils in grades one through six. At the secondary level, the speech clinicians in concert with reading specialists, provided services in the reading center for two class periods each week.

I. General Program Priorities
   A. Hierarchial Priorities
      1. Teacher knowledge of student language (knowing the grammatical and phonological differences that separate her own speech from the speech of the child)
      2. Student ability to understand spoken English (his own variety of English and that of his teacher)
      3. Student ability to communicate (to his peers and teachers) in his own variety of language
      4. Student ability to read and comprehend
      5. Student ability to communicate in writing
      6. Student ability to identify differences in his language style and that of his teacher
      7. Student ability to spell correctly
      8. Student ability to use Standard English grammar

   B. Team Member Roles
      1. Speech Clinicians are directly responsible for priorities 1, 2, 3, 6, 7, 8 and may provide occassional instruction in areas concerning 4.

2. Reading Teachers are directly responsible for 1, 3, 4, 5, 7 and may provide occassional instruction in areas concerning 2, 6 and 8.

Primary Level

In the first grade, formal training in standard English is minimal. Throughout the program, the clinician records samples of non-standard langauge patterns exhibited by the pupils. This information is utilized for future planning of formal instructional programs in standard English.

The major emphasis of the SI/LD program is upon developing, 1) concepts, 2) vocabulary, 3) auditory discrimination skills, 4) auditory-visual memory skills, and 5) processing skills.

Opportunities for oral communication are provided through role playing, story-telling and creative thinking games. Materials utilized in the program include language kits, pre-recorded tapes and pictures.

Program Priorities:

1. Language development (retention and discrimination skills, vocabulary, conceptual learning) and using his own variety of language for communication in the classroom
2. Reading instruction
3. Stimulation of Standard English
4. Specific auditory phonemic training activities based on student's developmental and dialectal errors (th, ch, str, "s" blends and "r" blends)
5. Developing skills in understanding spoken Standard English

III. Intermediate Level

A. Fourth Grade

In the SI/LD program, initiated with fourth grade pupils, the terms "school" speech and "everyday" speech are introduced. The major emphasis of the program is upon associating standard English with "school" speech and "non-standard" English with "everyday" speech. Clinicians and teachers assess the pupils' proficiency in utilizing standard English. Based upon the results of the assessment, drills are introduced to teach specific standard English forms, i.e., forming plurals. Pupils' oral responses elicited by clinicians and teachers are considered correct regardless of whether the response is representative of standard or non-standard English; however, when a pupil's response represents a non-standard form of English, the standard English equivalent is presented visually and orally by the teacher/clinician. The major program activities consist of language experience stories and reinforcement by the teacher/clinicians for utilizing standard English as "school" speech.

B. Sixth Grade

In the SI/LD program provided in the sixth grade, tests constructed by the clinicians/teachers are administered in order to gather baseline data. The program is developed in consonance with the needs of the pupils with reference to teaching standard English forms. The emphasis of the SI/LD program in the grade is upon (1) auditory and visual discrimination between standard and non-standard English forms, (2) utilizing oral and written forms of standard English correctly, (3) translating non-standard English and standard English to non-standard English.

Activities utilized in the SI/LD program at the intermediate level consist of language experience techniques and oral and written drills to teach standard English forms.

Program Priorities:

1. Language development
2. Stimulation of Standard English
3. Free verbal communication utilizing student's most familiar language style
4. Reading instruction
5. Developing ability to communicate in writing
6. Auditory training in Standard English
7. Pattern practice and opportunity to reproduce Standard English patterns in structured activities
8. Student ability to write in Standard English grammar
9. Student ability to spell correctly

IV. Secondary Level

In the SI/LD program provided in the ninth grade, more advanced activities related to developing proficiency in the utilization of standard English are provided, i.e., identifying non-standard English forms prevalent in the community, and simulating conversational situations associated with school, home, social or business settings when non-standard/standard English forms would be appropriately utilized.

Program Priorities:

1. Reading instruction
2. Stimulation of Standard English
3. Developing vocabulary and conceptual language skills
4. Developing ability to communicate in writing
5. Auditory Perceptual Training
6. Pattern practice and opportunities to reproduce Standard English patterns in structured activities
7. Write in Standard English grammar
8. Student ability to spell correctly
9. Role playing utilizing most appropriate language style with emphasis on Standard English style
10. Discussing the appropriation of the use of Standard English
11. Student ability to use Standard English grammar
12. Student ability to utilize pronunciation patterns appropriate to Standard English

District: Greenville County Schools

Contact Person: Ms. Anita K. Robbins

Address: 310 Camperdown Way
Greenville, South Carolina 29602

Model Utilized: Team Teaching Model

Grade Levels: Educable Mentally Handicapped - primary level

Number of Pupils: Entire class - (10-15 pupils)

Frequency and Length of Sessions: Sessions are conducted twice weekly by the speech/language clinician and three times weekly by the teacher for periods of 20 minutes each.

Rationale for Selection of Pupils: Teacher referrals, results of speech and language evaluations, and observation of pupils by the clinician.

Program Description: At the beginning of the school year, the following tests were administered: 1) audiometric evaluation, 2) oral peripheral examination, 3) articulation test, 4) Screening Test of Auditory Comprehension of Language and 5) Boehm Test of Basic Concepts, which serves as a pre-post-test measure.

The teacher and clinician conjointly developed program goals and objectives and designed a curriculum. The teacher observed each lesson conducted by the clinician and on alternate days, the teacher conducted the sessions. Throughout the program, verbal praise was used as positive reinforcement.

The following books and materials were utilized in the program: *Language Development of the Pre-Academic Child,* Developmental Learning Materials, i.e., "Sounds Auditory Tapes," the "Goal Kit," the "Teach Your Child To Talk" program, and teacher/clinician prepared materials.

District: Newberry County Schools

Contact Person: Ms. Ann Wessinger

Address: P.O. Box 718
Newberry, South Carolina 29108

Model Utilized: Team Teaching

Grade Levels: 1 and 2 grades

Number of Pupils: 6 classes - a total of 135 children

Frequency and Length of Sessions: The Clinician conducts one session each week for 50 minutes and the teacher conducts sessions four (4) times weekly for twenty (20) minutes each.

Rationale for Selection of Pupils: The pupils served in this program consist of those who are academically in the lower 20% of the first and second grade population as determined by test scores and teacher evaluation/observation.

Tests Administered: Boehm Test of Basic concepts and Northwestern Syntax Screening Test

Method of Measuring Progress: Progress was measured informally through teacher/clinician observation and evaluation. The "Boehm" and "NSST" were administered as pre-post-tests to a small percentage of the students.

Program Description: This program was designed to strengthen the expressive and receptive language of six and seven year old first and second graders. The clinician was directly responsible for establishing the goals and objectives of the program. The program included activities for improving listening skills, expressive language skills, self-concept and social skills.

The materials and equipment utilized in the program included DUSO Kits, Peabody Language Development Kits, experience Picture Charts, Hap Palmer Tapes/tape recorder, polaroid camera, stories and film strips.

Lesson Plan:

I. Goal
To review the basic parts of the body and use objectives to describe various parts.

II. Objective
To have each child in the class contribute one objective, use the name of the body part and to describe it.

III. Materials
Box of old make-up, wigs, tissues, cleansers, etc., large mirror, old clothes and hats.

IV. Procedure:
1. Have children name the basic parts of the body - eyes, ears, hair, nose, head, neck, arms, hands, fingers, chest, waist, hips, legs, knees, ankles, feet, toes.
2. Name parts again using one objective to describe a body part, i.e., black hair, blue eyes etc., as they see the person.
3. Prepare to fantasize - what would person look like with yellow hair, etc., and actually make up person as the children describe - changes are expected and encouraged.
4. Use the "make-up" person as the troll in the "Three Billy Goats Gruff" dramatization.

V. Evaluation and Assimilation
The teacher conducts the following activities with the class:
1. Find and cut pictures from magazines with long hair, black hair, brown eyes, etc.
2. Have children describe another student or teacher.
3. Have child draw/describe self, i.e., short hair, etc.
4. Have child draw and describe self as he/she with imaginative descriptors.

CONSULTANT MODEL

In the Consultant Model, the teacher assumes the major responsibility for the various aspects of the Speech Improvement/Language Development program. The responsibilities of the teacher include:

1. Assessing pupils' educational performance
2. Formulating goals and objectives
3. Developing Instructional Plans
    a. Planning activities to accomplish goals and objectives
    b. Selecting and preparing materials
4. Monitoring progress
5. Conducting Speech Improvement/Language Development classes

The responsibilities of speech and language clinicians include:

1. Assessing pupils' speech and language proficiency
2. Assisting teachers in formulating goals and objectives
3. Assisting teachers in the development of instructional plans
    a. Assisting in planning activities to accomplish goals and objectives
    b. Assisting in selecting and preparing materials
4. Conducting demonstration classes for teachers
5. Consulting with teachers throughout the school year

Strengths and Weaknesses In Utilizing This Model

Strengths

Since this model places the responsibility for speech and language development primarily upon the teacher, it may serve to increase their awareness of the importance of these skills. Teachers have greater access to pupils than do clinicians and, therefore, more opportunities through the school day to reinforce activities related to the program. This model enables the clinician to devote more time to providing services for "speech/language handicapped" pupils.

Weaknesses

The programs may not be provided on a regular basis, unless the teachers are committed to their role in facilitating speech and language development. some of the teachers may not have adequate preparation in areas related to speech and language development.

LEA Programs Utilizing the Consultant Model

The following are descriptions of Speech Improvement/Language Development programs where the Consultant model is operational:

District: Greenville

Contact Person: Noreen Steward

Address: 301 Camperdown Way
Greenville, South Carolina 29602

Model Utilized: Consultant Model

Grade Level: first and second grades, Trainable Mentally Handicapped - primary level

Number of Pupils: 85 pupils (8 pupils enrolled in each group)

Frequency and Length of Sessions: Sessions are conducted five days each week for a period of 20 to 30 minutes

Rationale for Selection of Pupils: Based upon the results of evaluation and pupils whose academic grades are below passing.

Program Description: Tests administered to the pupils enrolled in the Speech Improvement/Language Development classes include the 1) Metropolitan Reading Test, 2) Assessment of Children's Language Comprehension (ACLC) and 3) Language Development Screening Scale developed by the clinician participating in the "Piedmont Schools Project" during the 1974-75 academic year. Prior to initiating the Speech Improvement/Language Development program, the clinician provides in-service training for the participating teachers. Throughout the year, the clinician conducts one Speech Improvement/Language Development session weekly and the teachers conduct the remaining sessions. Progress is monitored periodically by re-administering the Language Development Screening Scale.

The program content emphasizes the following language related areas:

1. auditory discrimination
2. motor development
3. grouping
4. concept development
5. auditory memory
6. visual memory
7. language structure

The content of the program consists of notebooks developed in the "Piedmont Schools Project" which contains lesson plans for each area of emphasis.

The following represents a typical lesson plan which may be utilized by teachers conducting a Speech Improvement/Language Development program.

Lesson Plan:

Primary Area: Concepts - Colors

Secondary Areas: Motor Development - Body Imagery
Auditory Memory - Following directions

Materials and Equipment: Peabody Language Development Kit Level P, Color chips, Mirror, P. Mooney Bag and Puppet, Record 4-B, Record Player

Lesson: Have Record 4-B set up on the record player. Introduce the activity by playing band I (The P. Mooney Song). Have the P. Mooney Puppet lead the children in singing the song. Repeat as

often as needed. Have ready the P. Mooney Bag enough circular chains of ten randomly chosen color chips for each child, yourself, and the puppet. With the bag around your neck and the puppet on your hand, say, "Remember, 'The P. Mooney Song' says that he has a bag with surprises in it. Here is the big P. Mooney Bag. Now let's see what P. Mooney has in the bag for us."

Walk among children allowing each child to look in the bag, take a chain of chips from it, and place it around his neck. Place a necklace on the puppet and one on yourself. Say, "Today P. Mooney is going to let us play a game with color chips. We each have a necklace made of chips. A necklace is something to wear around your neck. Let's see how we look in our P. Mooney necklace." Each child will look in the mirror. Have the group take the necklace apart by naming colors. Say:

a. "John, take your blue link from your chain."

b. "_____, take your red link from your chain."

c. "_____, take your green link from your chain."

d. "_____, take your yellow link from your chain."

e. "_____, take your black link from your chain."

f. "_____, take your white link from your chain."

Conclude by having the children place their necklace back in the P. Mooney Bag.

The notebook also contains a list of materials suggested for use in teaching instructional units represented in each specific area of emphasis. (Lesson plans for each area of emphasis can be varied by utilizing different materials.) The following is an example of the materials recommended for use in teaching the concept of "color":

LANGUAGE DEVELOPMENT

Area of Concentration: Concepts

Skill: Color

Resource Handbook of Developmental Skills	Peabody Language Development Kit Level P	Goals Kit	Early Childhood Enrichment Series (2)	Workjobs	Sorting Box	Multi-Colored Blocks
Part 3, pages 1-15	Plastic Color chips Xylophone Magnetic geometric shapes (in color) and corresponding card Plastic fruits and corresponding card Manikin clothing Number concept cards (N 1B-10B N 1C-10C) Lesson: 2, 9, 17, 57 (A, B), 61, (B-4), 64 (A), 70 (B), 76 (B) 86, 96 (A-2) 146, 156, 175 (A-1)	Red 15, 16 17, 18, 19 Pink 9, 10 11, 17, 18, 20, 21, 22, 23, 24, 25, 33 Orange 15, 22, 38 Brown 1, 2, 6, 7 Gold 1, 3 Lt. Blue 12, 13, 15, 30 Gray	Color Match ups T.E. page 36	P. 40, 52 70, 102 104	Use color board to sort	DLM Design Cards

District: Fort Jackson Schools

Contact Person: Ms. Aileen Weiss

Address: Fort Jackson
Columbia, South Carolina 29206

Model Utilized: Consultant Model

Grade Level: Kindergarten and first grades

Number of Pupils: Approximately 25-30 pupils in each class

Frequency and Length of Sessions: Five days each week for a period of 15-20 minutes

Rationale for Selection of Pupils: Services provided for entire classes of pupils at the request of teachers who wish to participate.

Program Description: During September of each school year, the clinicians conduct a ten day workshop for teachers who are interested in initiating SI/LD programs. In the workshop, clinicians explain various aspects of the program and demonstrate the use of materials such as Peabody Articulation Cards, Peabody Language Development Kits, Concepts for Communication (DLM) and books such as The Child Speaks: A Speech Improvement Program for Kindergarten and First Grade and Learning to Listen. During the workshop, teachers prepare materials to be utilized in the SI/LD program.

Following the workshop, teachers who are interested in initiating the program contact the clinicians. During the first week in October, the clinicians demonstrate the program in the classroom. Following the classroom demonstration, the teachers have an opportunity to decide whether or not they wish to continue the program. Teachers who choose to continue the program begin conducting the sessions with periodic supervision from the clinician during the remainder of the month. Subsequently, the teachers assume major responsibility for the program and during the remainder of the school year, clinicians serve as consultants to the teacher.

Lesson Plan: *

Objective: Auditory training, lengthen attention span, group interaction, speech development for /m/.

Emphasis: Introduction, production, and recognition of the Hummingbird Sound.

Materials: Hummingbird Sound picture; flannel board; artificial flowers; drinking straws; picture of hummingbird; picture of cow, color sheets.

Thursday

Instructor: (Place Hummingbird picture on the flannel board) Today in our listening period, we are going to talk about a new sound called the hummingbird sound. This is a picture of a hummingbird. This bird is very small and moves so rapidly that it is difficult to see it. The wings make a humming sound as it moves from flower to flower. This little bird has a long bill, and it uses this bill to get honey juice out of flowers. It especially likes honeysuckle flowers. Listen, while I read you a little poem about the hummingbird.

MY HUMMINGBIRD

A tiny little hummingbird
With humming humming wings,
Hums near my honeysuckle vine
And out the honey brings.

If happy little hummingbird
Could see that I stood near;
He'd start his wings in humming
And hum away, I fear!

We can make a humming sound, too, but we don't do it with wings - we do it with our lips. Very often, instead of singing a little tune, we hum a little tune. Remember that we called the nose one of our sound helpers. Instead of coming out of our mouth as most sounds do, the hummingbird sound comes out the nose. Put your finger on the side of your nose, close your lips, and hum. You can feel the sound coming through, can't you? Now make the hummingbird sound and hold your nose for just a second. It cuts off the sound, doesn't it?

Let's see if we can think of some names that begin with the hummingbird sound. Perhaps some of your names do. (Have these children stand) Do you know some people by these names - Mary, Myra, Minnie, Margaret, Mabel, Maimie, May, Marian, Melissa, Melanie, Marilyn, Maud, Mavis, Miranda, Mildred, Mark, Max, Myron, Miles, Milton, Melvin, Marvin, Merle, Malcolm, Matthew, Maynard, Mike, Mortimer?

Friday

Dramatization: (This will give practice in production of the sound) Would you like to play "Hummingbird?" All right, we'll need some flowers to place in the garden! (Give several children an artifical flower and station them in different parts of the room. Select one child or more to be hummingbirds and provide them with drinking straws to be placed in their mouths for bills. The hummingbirds fly in an out among the flowers making the humming sound and sticking their bills down in the flowers to draw out the honey)

Place picture of cow on flannel board. I'd like you to meet "Moo-moo Cow." Her name used to be "Mirandy", but she had her name changed. Listen to this little poem about the cow, and you'll find out why she had her name changed. Listen, also, for the hummingbird sounds in this poem.

MOO-MOO COW

Mirandy is my moo-moo cow,
  Who lives out at the farm;
She moos out in the pasture;
  She moos down in the barn!
She moos and moos at everything -
  The mailman and the moon;
She even moos when being milked -
  What's more - she moos off tune!
My father said, "We'll change her name -
  She's not Mirandy now;
If all she wants to do is moo -
  We'll call her "Moo-Moo Cow!"

(Discuss the poem with the children. Have them name the words that contain the hummingbird sound.)

Monday

Game: (Half of the children are chosen to be spinning tops. The other half wind up the tops (pantomime). After they are wound up, the tops start humming and turning around until they fall over. The children then reverse places so that all might have an opportunity to produce the sound. Caution the children to stop spinning if they become dizzy. Remind them, also that as long as they spin they must make the hummingbird sound.)

Tuesday

Game: (Child who is it gets in the center of the ring of children. He closes his eyes and points his finger. Children move around in a circle chanting the rhyme: MEENY, MEENY, MINY, MOE - HUMMING, HUMMING, ROUND WE GO. When the circle is stopped by a whistle, the child in front of the pointing finger becomes it.)

(Pass out the color sheets of the hummingbird sound. Urge the children to find pictures of the sound and bring them for the sound scrapbook.)

Wednesday:

Objective: Auditory training and discrimination, group interaction through competition, speech improvement.

Emphasis: Listening for /m/ sound in all positions.

Materials: Hummingbird Sound picture; flannel board; Popo boxes; contest markers.

Instructor: Who can tell me what sound we studied in our last listening period? Yes - the hummingbird sound, and we learned that we make this sound by pressing our lips together, turning on our voice motors, and letting the sound come out the nose. (Take time, also, to discuss the pictures brought in for the scrapbook. This encourages more children and, consequently, makes them more aware of the sound being studied. The parents, too, are informed as to what is going on in the listening period. The scrapbook should always be available to the children during any free time they might have to browse through it.)

We are going to play a little game today, and it is called GUESS WHAT I AM. Each answer will begin with the hummingbird sound, so listen closely while I give you some clues.

1. I have a long tail - I run around the house at night - squeak - I like cheese - my name begins with the hummingbird sound. Mouse.
2. I like to climb - I like to chatter - I live in the jungle or zoo - my tail is long and I like bananas - my name begins with the hummingbird sound. Monkey.
3. I live high in the sky - you see me at night - I like to shine - I make a bright light - some people say that I have a face - I am round - my name begins with the hummingbird sound. Moon.
4. You live with me - I take care of you - I cook your food - I read to you - I love you - my name begins with the hummingbird sound. Mother, Mama.

5. I come to your house nearly everyday - I wear a uniform - I put things in a little box for your family - I carry a pack on my back - I bring you letters - my name begins with the hummingbird sound. Mailman.

6. You see me in the summer - I like to be around water - I make a humming sound - I like to bite you - you swat me - my name begins with the hummingbird sound. Mosquito.

(Place the three Popo boxes in front of the class so that the word dog is formed) Look who is with us this listening period. It's our little word dog, Popo! The head always comes first, doesn't it? So we shall call this our beginning box. The tail always comes last, so we shall call this our ending box. This part is in the middle, so we shall call it the middle box. (Choose children to come to the front and point out the beginning, middle, and ending boxes - going from the left to the right. Call attention to the labels on the front.)

Now, boys and girls, I'm going to divide you into two sides, and we'll have a little contest to see which side has the better listeners. I'll place some pictures on the flannel board which have the hummingbird sound in their names. Each of you will have a turn to tell me where the sound comes in the word - at the beginning, at the end, or in the middle. If your answer is correct, then you may come and get the picture, place it in the right box, and earn a point for your side. (Proceed with the contest until every child has had an opportunity to respond.)

Contest markers. Score may be kept in any manner. Little children enjoy the competition provided in these contests and enter into the activity with enthusiasm. Since competition is something that children must cope with all their lives, this is a good time to begin teaching children how to meet it. Care should be taken to keep the sides balanced as evenly as possible, and the skillful teacher will see that each child meets with some success in the activity.

*Modified Lesson from Unit 5 *Learning to Listen* by Celestine Houston.

APPENDIX A

Screening and Diagnostic Tests

TITLE	SOURCE		PRICE	PUBLISHER'S DESCRIPTION
Peabody Picture Vocabulary Test (PPVT)	American Guidance Service Inc., (AGS) Publishers' Bldg. Circle Pines, MN 55014		$14.00	Author: Lloyd M. Dunn, Ph.D. Range: 2 years, 6 months to adult. Time: 15 minutes or less. Scoring: Completed in less than two minutes. Forms: A & B. Description: The PPVT is an individually administered wide-range screening instrument utilizing a graduated series of 150 plates, each containing four pictures. To administer the scale, the examiner shows a plate and says the corresponding stimulus word. The subject is to point to, or otherwise indicate, the picture which best illustrates the meaning of the stimulus word. Since the plates are necessary only to test the subject from a basal of eight consecutive correct responses to a ceiling of six errors within eight consecutive plates; the scale is given over the critical range only. Raw scores can be quickly converted to three types of derived scores: mental ages, intelligence quotients, and percentile ranks. Standardization: The PPVT was standardized over the age range two years, six months through 18 years. Age norms were extrapolated downward to one year and 9 months. For adults, the age 18 norms are used.
Verbal Language Development Scale (VLDS)	AGS	Score Sheets Manual	$2.35 .90	Author: Merlin J. Mecham, Ph.D. Range: 1 month to 16 years. Time: Untimed. Scoring: Accomplished as informant is interviewed. Forms: one form. Description: The VLDS is an expansion of the verbal portion of the Vineland Social Maturity Scale. It yields a language age equivalent based on characteristics of communication. Standardization: The VLDS was standardized on a sample selected as representative of the U.S. population with respect to urban-rural residences, socioeconomic level, and sex.
First Grade Screening Test (FGST)	AGS	Girl's Booklets Boy's Manual	$6.25 $6.25 $2.80	Authors: John E. Pate, Ed.D. and Warran W. Webb, Ph.D. Range: Kindergarten and beginning first grade. Time: Approximately 45 minutes for kindergarten, 30 minutes for first grade. Scoring: Hand scoring on fold-out tab in test booklet. Forms: One form. Separate booklets for boys and girls, to minimize ambiguity of responses. Description: The FGST was designed to identify children who are likely to experience significant difficulty during their first year of school. It

TITLE	SOURCE		PRICE	PUBLISHER'S DESCRIPTION
First Grade Screening Test (FGST) (continued)				provides early identification of children who need individual assessment, so that appropriate compensatory or remedial attention can be given. The FGST should be administered during the last portion of the average kindergarten year or during the first month of first grade.
Goldman-Fristoe-Woodcock Test of Auditory Discrimination	AGS	Kit with cassette	$23.00	Authors: Ronald Goldman, Ph.D., Macalyne Fristoe, Ph.D., Richard W. Woodcock, Ed.D. Range: 4 years and above. Time 10 to 15 minutes including training. Scoring: less than two minutes. Forms: one form. Description: The G-F-W evaluates speech-sound discrimination under both quiet and distracting noise conditions. The format includes a Series of Test Plates, each containing four drawings and a pre-recorded audio tape which ensures standardized presentation of test materials. The subject responds to a stimulus word by pointing to one of the four pictures on the plate which is simultaneously presented. Before actual testing begins, the subject completed a pretest and training procedure to ensure that she or he knows that required word-picture associations. The G-F-W is contained in a convenient Easel Kit that includes all test materials and accessories. An optional set of 61 Large Training Plates is available for familiarizing groups of subjects with the picture and word associations that will be used in the test. Each training plate contains one of the pictures that will appear during the actual test. Pretraining with very young or immature children shortens the time required for the pretest and training procedure that routinely precedes the actual test. Standarization: The G-F-W Test was standardized on 745 subject aged 384 from the states of Minnesota, New Jersey, and Tennessee. Persons with moderate or severe hearing loss were excluded from the sample. Percentile norms by age level are provided from below age 4 to 70 and older.
Goldman-Fristoe-Woodcock Auditory Skills Test Battery (G-F-W Battery)	AGS	Battery with cassette	$98.00	Authors: Ronald Goldman, Ph.D., Macalyne Fristoe, Ph.D., Richard W. Woodcock, Ed.D. Range 3 to 80 and above. Time: Approximately 10 to 15 minutes for each test. Scoring: Scoring is accomplished during administration of each test. Forms: one form. Description: The G-F-W Battery consists of a wide range of diagnostic instruments for identifying and describing deficiencies in auditory functioning. The G-F-

TITLE	SOURCE	PRICE	PUBLISHER'S DESCRIPTION
Goldman-Fristoe-Woodcock Auditory Skills Test Battery (G-F-W Battery) (continued)			W Battery is used most often by reading specialists, by speech and hearing clinicians and by school psychologists. Usefulness of the test battery extends from preschool to the geriatric population.
Utah Test of Language Development (UTLD)	Communication Research Assoc. P.O. Box 11012 Salt Lake City. Utah 84111	$20.00	An objective instrument for the measurement of expressive and receptive language skills in both normal and handicapped children. The UTLD utilizes the developmental appraisal of language readiness and has proved to have special value as a tool for the speech pathologist, and psychologist in various clinical and educational settings. Yields a language-age-equivalent score from 1 to 15 years and can be administered in approximately 30 to 45 minutes.
Screening Test for Auditory Comprehension of Language (STACL)	Learning Concepts 2501 N. Lamar Austin, TX 78705	$ 3.95	Elizabeth Carrow-Woolfolk, Ph.D. Ages 3-6. Administration Time: 5 to 10 minutes. Description: the STACL is designed to identify children with receptive language difficulties for in-depth testing with the Test for Auditory Comprehension of Language (TACL). The STACL is composed of 25 items taken from the TACL. The items are representative samples from the vocabulary, morphology, and syntax sextions of the TACL. The STACL is a group administered test. Each child responds to the examiner's oral stimuli by marking the correct response in his/her individual booklet.
Test for Auditory Comprehension of Language (TACL)	Learning Concepts 2501 N. Lamar Austin, TX 78705	$39.95	Elizabeth Carrow-Woolfolk, Ph.D. Ages 3-6. Administration Time: 3 and 4 years - 20 minutes, 5 and 6 years - 10 minutes. Description: The TACL is designed to measure a child's receptive language in English or Spanish. The test covers vocabulary, morphology, and syntax. Construction: The TACL is composed of 101 pictorial stimuli. Each stimulus contains 3 line drawings, one depicting the correct response, one depicting the opposite or negative of the correct response, and one decoy item. A Scoring/Analysis Form provides a categorical breakout in the areas of vocabulary, morphology, and syntax. Administration: The TACL is an individually administered test. The child responds to the examiner's oral stimuli in English or Spanish by pointing to one of three line drawings. As the child responds, the administrator records his/her answers on a separate Scoring Form. Research: The Test Manual contains norm tables based on total raw score for ages 3 through 6 at six month intervals. Research data including reliability and validity data are also included in the Test Manual.

TITLE	SOURCE	PRICE	PUBLISHER'S DESCRIPTION
Carrow Elicited Language Inventory (CELI)	Learning Concepts	$44.95	Elizabeth Carrow-Woolfolk, Ph.D. Ages 3-7. Administration Time: 5 minutes. Scoring time: 20-30 minutes. Description: the CELI is a diagnostic procedure that attempts to bypass the problems inherent in sampling to measure the child's productive control of grammar. The procedure was designed to provide a reliable and effective method for obtaining performance data on a child's grammatical structure. Construction: The CELI is based on the technique of eliciting imitation of a sequence of sentences that have been developed to include basic sentence construction types and specific grammatical morphemes. The CELI consists of 52 stimuli which include 51 sentences and 1 phrase ranging from 2 words to 10 words. The test covers 12 grammatical categories and 5 error types. Administration: Designed for individual administration only the CELI requires a tape recording of the child's imitations of the 52 stimuli presented orally by the examiner. The stimuli and the child's response are recorded on high fidelity audiotape equipment. Responses are then transcribed in phonemic notation on the Scoring/Analysis Form. The form lists all words used in the stimulus sentences according to grammatical classification and provides a convenient format for analyzing errors of substitution, addition, omission, transposition and reversal. A separate Verb Protocol Sheet is used for in-depth analysis of the child's production of verb forms. Research: The test manual contains research that includes reliability, validity, and normative data. The norm tables are at 6 month age intervals beginning at age 3-0 through 7-11.
Comprehensive Tests of Basic Skills (CTBS)	CTBS/McGraw-Hill Del Monte Research Park Monterey, CA 93940	Language Test Books Levels 1-2 (handscoreable) $9.45 Levels 3-5 (use answer sheet & order separately) $12.25	The CTBS, forms Q and R, measure the extent to which students have acquired skills that are required for effective use of language and number in everyday living and for further academic study. The items measuring these skills are classified by intellectual processes and content in the areas of Reading, Language, Arithmetic, and Study Skills, so that results are readily usable in further educational planning, instruction, and guidance of students. As part of a series that is scaled continuously from Grade 2.5 through Grade 10, CTBS provides a basis for individual and group growth comparison over an extended period of time.

TITLE	SOURCE	PRICE	PUBLISHER'S DESCRIPTION
Vocabulary Comprehension Scale (VCS)	Learning Concepts 2501 N. Lamar Austin, TX 78705	$39.95	Tina E. Bangs, Ph.D. Ages 2-6. Administration Time: 20 minutes. Description: The VCS is designed to provide clinicians and teachers of language learning disabled children with baseline information about comprehension of pronouns, words or position, quality, quantity, and size. With this baseline data, the teacher can identify the functioning level of a child and plan classroom activities that assist the child in developing a vocabulary that will be appropriate for entrance into kindergarten or first grade. The Test Manual contains administration instructions, normative data, as well as follow-up instructional activities for the teacher, clinician, or parent. Construction: The VCS contains 61 stimuli divided into four game-like activities: Garage, Tea Party, Buttons, and miscellaneous. Each activity area has objects the child must manipulate in response to the oral stimulus given by the examiner. The game-like format provides a casual and relaxed testing atmosphere which allows the child to perform at his/her maximum ability. The Manual contains instructional activities with suggestions to the teacher, supportive personnel, and parents for teaching the words and concepts the child is unfamilar with as demonstrated by his/her test score. Administration: An oral stimulus is given by the administrator and the child must respond by manipulating the appropriate item according to the direction given. Each response is recorded on a Scoring Form. The Scoring form includes directions for eliciting responses from the child, space for recording performance as either a "pass" or a "fail" and a Summary Sheet which divides the stimuli into the language concepts being tested. Developmental norms are provided for each item. Research: The VCS was standardized on culturally diverse, middle-income children in a large metropolitan area in Texas. Standardization and normative data are provided in the Test Manual.
Basic Concept Inventory (BCI)	Follett Publishing Co. 1010 W. Washington Blvd. Chicago, IL 60607	$16.50	Author: Siegfried Engelman Purpose: BCI identifies children from preschool through primary grades who lack knowledge of the basic concepts frequently used in verbal explanations and directions. Description: BCI is a criterion-referenced checklist of the basic concepts a child needs to succeed in early academic activities. BCI reveals whether a child is familiar with basic concepts (such as "not" and knowledge of

TITLE	SOURCE	PRICE	PUBLISHER'S DESCRIPTION
Basic Concept Inventory (BCI) (continued)			plurals and pronouns) and whether he is familiar with conventional statements and can repeat them. It also indicates whether he can perceive the similarity of elements sequenced in a pattern. The Teacher's Manual provides comprehensive instructions for administration and scoring and includes information for follow-up procedures to help children learn the basic concepts with which they have difficulty. Features: BCI is especially useful with experientially-deprived and emotionally-disturbed children. BCI leads directly from identification of learning difficulties to remediation. BCI is based on the simple concepts frequently used in verbal directions in the classroom.
Boehm Test of Basic Concepts	Psychological Corp. 757 Third Avenue New York, N.Y. 10017	Test Booklet $7.00 Manual .75 Specimen Set 1.50 Directions .25 Spanish Directions .50 Class Record Form (specify form) .30	Author: Ann E. Boehm. Range: Grades kindergarten through 2. Time: 15 to 20 minutes for each booklet. Forms: A and B. Description: the Boehm is a picture test designed to appraise the young child's mastery of concepts that are commonly found in preschool and primary grade instructional materials and that are essential to understanding oral communications from teachers and fellow pupils. The BTBC is designed as both a diagnostic and a remedial or teaching instrument. The test not only identifies children whose understanding of basic concepts is low, but also identifies the particular concepts that children don't know. Concepts not known are used by teachers as the content or focus of either group instruction or special individual help. The test is expected to be most useful with kindergarten and first grade children but also be of value with grade 2 children in lower socio-economic areas.
Assessment of Children's Language Comprehension (ACLC)	Consulting Psychologists Press Inc. 599 College Ave. Palo Alto, CA 94306	$42.25	Authors: Rochana Foster, Jane Giddan and Joel Stark. Range: 3 years to 6 years, 11 months. Time: untimed-approximately 10 to 15 minutes. Scoring: number of correct items is converted to a percentage score. Description: The ACLC is composed of four parts. Part A is a 50 item vocabulary test consisting of nouns, adjectives, present progressive verbs and prepositions; these elements serve as core vocabulary for section B, C and D. Standardization: The test was standardized on a group of nursery school and kindergarten pupils. The greatest portion of subjects were white; however, black, Asian-American and Mexican-American children were represented.

TITLE	SOURCE	PRICE	PUBLISHER'S DESCRIPTION
Northwestern Syntax Screening Test (NSST)	Northwestern University Press 13735 Benson Ave, Evanston, IL 60201	$10.00	Author: Laura Lee, Ph.D. Range: 3 to 8 years. Time: untimed - approximately fifteen minutes. Scoring: Binary correct or incorrect. Description: The NSST is designed to screen for comprehension and expression of morphologic and syntactic forms. The child points to visual stimuli in the receptive portion and responds verbally in the expressive portion. The task consists of 20 sentence pairs arranged in increasing order of difficulty. Grammatical items tested include: prepositions, pronouns, plurals, negatives, verbs, possessives, wh-questions, yes-no questions, passives, and indirect objects. Standardization: The test was standardized on normal children from kindergarten and public schools; the pupils represented middle to upper-middle income communities.
The Parsons Language Sample (PLS)	Spradlin, J.E. (see references)		Author: J.E. Spradlin, Ph.D. Range: Mentally retarded - ages 7-11 to 15-8. Time: untimed. Scoring: Binary, correct or incorrect, percentile ranks may be derived. Description: The purpose of the PLS is to assess verbal and nonverbal language behavior of mentlly retarded children. It consists of seven subtests: Vocal (TACT, Echoic, Gesture and Intraverbal Gesture), Nonvocal (Echoic Gesture, Comprehension, and Intraverbal Gesture) and Vocal/Nonvocal (Mand). Standardization: the test was standardized on mentally handicapped pupils.
Illinois Test of Psycholinguistic Abilities (ITPA)	University of Illinois Press Urbana, IL 61801	$43.50	Authors: Drs. Samuel A. Kirk, James J. McCarthy and Winifred D. Kirk. Range: 2 to 10 years. time: Subtests are untimed, with the exception of the Visual Closure Subtest. Scoring: Basal levels and ceilings vary among subtests, scores for individual subtests can be converted to a scaled score or age score and an overall language age can be obtained from the total raw score. Description: The purpose of the ITPA is to assess the psycholinguistic abilities and disabilities of children who are encountering learning disabilities. The test consists of 10 basic subtests and 2 optional tests which include: Auditory Reception, Visual Reception, Auditory Association, Visual Association, Verbal Expression, Manual Expression, Grammatic Closure, Visual Closure, Auditory Closure, Sound Blending, Auditory Sequential Memory and Visual Sequential Memory. Standardization: The group consisted of children of average intelligence, average school achievement and absence of emotional problems or sensorimotor problems. Children were drawn from predominately English speaking families in five mid-western communities.

TITLE	SOURCE	PRICE	PUBLISHER'S DESCRIPTION
Developmental Sentence Analysis (DSA)	Laura L. Lee (see reference)		Author: Laura L. Lee, Ph.D. Range: Developmental Sentence types (DST) 2 years to 2-11 years and Developmental Sentence Scoring (DSS) 2 years 6-11 years. Description: The DSA consists of two separate procedures: DST chart and DSS. The DST chart evaluates utterances which do not contain both a subject and a verb. The DSS method evaluates the grammatical structure of complete sentences. Both methods evaluate the child's use of the grammatical rules of standard adult English. The DSA is not appropriate for use with children from bilingual homes or speech communities with significant dialectal variations. Various methods are proposed for evaluating the child's language development from the DSA, including, 1) counting the number of utterances at each DST level, 2) looking at the variety of sentence types, and 3) examining the grammatical development within levels. Standardization: Based DST classifications of speech samples of normally developing children from 2 years to 2-11 years from middle-income homes. The DSS was based on samples of white children from 2 years to 6-11 years representing middle-income families where standard English was spoken.

APPENDIX B

Materials for Speech Improvement/Language Development

TITLE	SOURCE	PRICE	PUBLISHER'S DESCRIPTION
Language Making Action Cards	Word Making Productions P.O. Box 15038 Salt Lake City, Utah 84115	$27.50	600 cards of action pictures, story sequence pictures personal expression, color, shapes, numbers and comparatives. Each card is printed in full color, varnished for longer wear, and numbered for easy filing and indexing. There are 480 different picture cards plus 120 duplicated cards for matching activities. Cards are 4 1/2 x 2/34" and come in die cut sheets for easy assembling. Two plastic boxes are included for filing the cards in numerical sequence.
Suggestions for Teaching Language Skills	Word Making Productions	$ 5.25	A manual for beginning language instructors containing suggestions for teaching language skills with the aid of the Language Making Action Picture Cards and Stickers. The manual includes extensive detailed

TITLE	SOURCE	PRICE	PUBLISHER'S DESCRIPTION
Suggestions for Teaching Language Skills (continued)			indexes grouping the picture cards by language areas. It covers such topics as identity vocabulary; simple and negative statements; singular and plural verbs and pronouns; questions and commands; suggestions for teaching color, shapes and numbers; number concepts; and plurals. Also includes ideas for teaching prepositions; personal expressions; polars; comparatives; multiple attributes; and story telling from sequence pictures.
Concepts for Communication Unit I (CFC)	Developmental Learning Materials 7440 Natchez Ave. Niles, IL 60648	$43.00	The aim of this unit is to increase students' skills of aural comprehension by concentrating on memory, confidence and control, attentiveness and concentration, decoded complex language, and deduction. The language is organized around six themes: Position, What Does It Mean? What Happens If? Comparison, The Reason Why, and Time, and becomes more difficult and complex by stages, while the motor responses required for the answer sheet remain simple. The student works individually and can rewind the tape and listen as often as needed in order to grasp the meaning. The materials are six grades, pre-recorded cassettes presenting thirty-five lessons, a sample workbook, eight spirit-master answer sheets, four answer prompt cards, and a teacher's manual.
Concepts for Communication Unit II (CFC)	Developmental Learning Materials	$54.00	With this unit the aim is to increase the student's skill and flexibility in classifying data. The unit focuses on perception of similarity and difference, essential attributes, conceptual sets, and the language of classification. Particular attention has been given to the needs of poor readers, and written work has been prepared to reinforce the unit's oral work. The whole class or groups of students can be involved together in the work of this unit. Central to the materials are matrix cards and a matrix builder; also included are activity books, missing picture books, and a teacher's manual.
Unit III (CFC)	Developmental Learning Materials	$59.00	The aim of this unit is to increase the students' communication skills through developing their powers of description and effective listening and of appropriate questioning if the message is not sufficiently explicit. Communication is an interaction between sender and receiver. In this unit, the students work in pairs or smaller groups, the members of the pair or team participating in the two complementary actions, sending and receiving the information, and experiencing an immediate awareness of

TITLE	SOURCE	PRICE	PUBLISHER'S DESCRIPTION
Unit III (CFC) (continued)			their communication effort. Materials in this unit include symbol-drawing books, map-drawing books, route books and board, picture and detective-search books and a teacher's manual.
Word Making Cards	Word Making Productions	$30.00	Catalog of pictures for instant therapy use: 600 different pictures, full color illustrations, numbers for easy filing, blend sections for s, l, t, and k, varnished for longer wear, plastic containers, numerical and alphabetical indexes and directions included. Cards come in die cut sheets of eight pictures to a page for easy assembling. Both picture cards and index cards are numbered in sequence. Set is divided into 25 consonant sounds with simple attractive pictures showing each sound in each of the three word positions: initial, medial and final. In addition, there are four blend systems.
Goldman-Lynch Sounds & Symbols Development Kit	American Guidance Service Inc., (AGS) Publishers' Bldg. Circle Pines, MN 55014	$140.00	Authors: Ronald Goldman, Martha Lynch. Range: 4 1/2 through 9 years. Time: 30-40 minutes per lesson for classes of normal children. Children with severe articulation difficulties or learning disabilities will need additional time. Description: The Goldman-Lynch Kit is a complete, 64 lesson program that stimulates production of English speech sounds and recognition of their associated symbols. The program is used as an introduction to reading and for early phonics training, speech improvement, and speech therapy in individual or group settings. Through a combination of visual and auditory stimulation, the activities and materials help children recognize symbols in a modified alphabet and help them relate these symbols to the associated sounds. The lessons focus on: 1) auditory and visual discrimination and memory training; 2) integratation of sounds into words and sentences; 3) building a vocabulary common to most reading programs; 4) observing the order or sounds, syllables, words, and sentences; and 5) training in phonics skills.
Learning Staircase	Learning Concepts 2501 N. Lamar Austin, TX 78705	$199.95	Lila Coughran, M.A. and Marilyn Goff, M.S. Learning Staircase is an innovative program designed to systematically evaluate and provide remediation for the needs of special children. The program includes a Comprehensive Assessment instrument which can be administered as a pre-post-test measure by a teacher, para-professional or clinician so that individual prescriptions can be derived for each child. A curriculum composed of twenty criterion-referenced modules provides teachers with

TITLE	SOURCE	PRICE	PUBLISHER'S DESCRIPTION
Learning Staircase (continued)			a powerful set of instructional techniques and materials. Each component of the Learning Staircase is designed to allow the individual child to achieve maximum performance at the pace which best fits his/her needs. The following content areas are included in the program: Adjectives, Auditory Memory, Auditory Perception, Body Image, Classification, Colors, Fine Motor, Gross Motor, Number Concepts, Preverbal, Reading Readiness, Same and Different, Sequence, Spatial Relationships, Time, Toilet Training, Verbal Comprehension, Verbal Expression, Visual Memory, Vocabulary. Construction: Each module consist of a series of tasks hierarchically organized in a developmental sequence for children functioning at a 3-6 year old performance level. However, there are some modules which contain tasks which begin at 18 months and go to 7 years. All materials and instructional procedures are designed to facilitate administration, assessment, and adaptability to the needs of each child and the practical demands of the classroom environment. Student progress is monitored and recorded on the Grid Pad.
Captain Good Speech and Mr. Mumbles	Eye Gate House, Inc. 146-01 Archer Ave. Jamacia, NY 11435		A developmental skills program. An audiovisual kit designed to improve the listening and speaking skills of pre-school and primary age students. Objectives are: a) improved auditory discrimination b) improved aural comprehension c) improved oral speaking habits.
SRA Learning to Think Series	Science Research Assoc, Inc. Subsidiary of IBM Chicago, IL		Lessons in the series provide training in the following areas: verbal meaning, space, reasoning, quantitative concepts, word fluency, memory, motor perception. Excellent for all aspects of language development. Books are graded in difficulty. Elementary through Intermediate.
My Kindergraph Kit	Follett Educational Corp., 1010 W. Washington Chicago, IL 60007		Good for all aspects of Language Development. Many sequence cards and sequence stories, concept cards (see especially Mother and Baby Animals), cards for naming, action pictures, cards to go with nursery rhymes, etc. Pre-school and elementary levels.
The Listen-Hear Books	Follett Corp.	$18.50	Excellent series of books for auditory discrimination of speech sounds in articulation training. The plot of each story is such that the main character must learn the correct sound so that the story can reach a happy

TITLE	SOURCE	PRICE	PUBLISHER'S DESCRIPTION
The Listen-Hear Books (continued)			conclusion. Games and activities for kindergarten and first grade described in the Guide. Stories good for pre-school through 2; beautifully illustrated.
For Speech Sake	Fearon Publishers, Inc. 2165 Park Blvd. Palo Alto, CA 94306	$ 2.00	A simple classroom speech improvement program through games, jingles, story play, poems and other activities. Useful for voice problems in young children (4-8), auditory discrimination, language development, generating grammatical responses, eliciting spontaneous speech.
Talking Time	Webster Division, McGraw Hill Co. St. Louis, MO	$ 7.00	Excellent books for use with articulatory problems of children from kindergarten through grade four. Material to guide teaching of speech sounds, listening and speaking skills.
Listen and Learn Volume I	Pacific Records	$ 10.00	These 4 records are for reading readiness and speech improvement. The s, r, th, and l sounds are emphasized.
Listen and Learn Volume II	Pacific Records	$ 7.50	These three records include sh, k, and g sounds.
Listen-Look-Say	Educators Publishing Service 74 Moulton St. Cambridge, Mass 02138	$ 8.00	This is a speech improvement program for 1st or 2nd grade. It consists of three parts: Teacher's Manual, Seven Pupil Notebooks, and a Parent's Guidebook.
Sound for the Secondary School	Remediation Assoc., Inc. Van Nuys, CA		For vowel and dipthong practice. Good for use with foreign accent cases and students in need of specific help in sounding out words. A practice manual for the student.
Listening and Speech Activities Through Music and Story Volume I	Pacific Records	$ 6.00	This record includes warm appealing stories and songs designed to involve children in activities for auditory discrimination.
Volume II			This record has activities and movement combined with songs and stories.
My Speech Workbooks Books 1-3	Interstate Printers & Publishers Danville, IL 61834	$ 3.50	These workbooks are based on the successful application for five points: see it, say it, hear it, feel it, do it. These are workbooks, not textbooks. They are written to meet the needs of the child who needs help in addition to that which the trained speech therapist can provide.

TITLE	SOURCE	PRICE	PUBLISHER'S DESCRIPTION
Speech Improvement Cards	Scott Foresman Co. Chicago, IL	$ 7.00	A series of picture cards designed for use with articulation problems. Picture cards are not to be used until the child can approximate the sound in syllables and words. The teacher's manual outlines the procedure to be used prior to this stage of therapy. Sixteen test cards are provided as an Articulation Test. Many games are suggested for use with picture cards.
Best Speech Series	Stanwix House, Inc. Chartiers Ave. Pittsburg, PA	$ 1.50 each	The Best Speech Series consists of seven sound books and an accompanying teacher manual for each of the seven sound books. The Series presents seven sounds with which children has most difficulty. These are s, r, th, l, k, g, and sh. Books are very good as a source or ideas for teaching sound production in initial, medial, final positions. Auditory awareness and production exercises.
Manual for Effective Use of the Best Speech Series with Special Pupils	Stanwix House, Inc.		A manual to be used for development of listening skills and sound awareness. A host of activities for use in sound discrimination are supplied. Includes pictures, stories, poems, motor activities for developing awareness of sounds in isolation as well as in initial, medial, and final positions of words. Recommended ages: 4-8.
Read the Picture Stories	Word Making Productions	$ 20.00	This book contains stories for the practice of the sounds s, r, d, t, l, dz, f, k, tg, g.
Sounds I Say Book I & II	Chronicle Guidance	$ 1.50 each	These books present a new approach to the teaching of sounds for speech improvement and reading readiness.
Play It By Ear, Auditory Training Games	John Tracy Clinic Los Angeles, CA		Excellent book of auditory training activities for children 2-8. Activities are grouped according to the following activities: Sounds of environment (human, animal, work, noises), Music (pitch, intensity, duration rhythm), Voice (separate game for vowels, consonants, with pitch, intensity and duration). Section on words, phrases, sentences, stories and nursery rhymes.) Distance, Direction (of sound source and listening with both ears).
The Clown Family Speech Book	Charles C. Thomas Springfield, IL	$ 6.50	Excellent book to foster listening, imitation, awareness of speech sounds. Series of stories provide good motivation. Exercises and games to play with the stories are detailed. Aims of the book: Breathing, Awareness of mouth parts, correct pronunciation, Distinct Enunciation, Rhythmic pattern, Pleasant tone, Fluency. For children 3-8.

TITLE	SOURCE	PRICE	PUBLISHER'S DESCRIPTION
The Good Speaker Family	Genevieve Arnold 4926 Culmore Dr. Houston, 21, TX		Little book with illustrations on the nature of good speech. May be used to teach elements of good speech to young children.
Readiness & Reading for Mentally Retarded Children	John Day Books School & Library Dept. 62 W. 45th St. New York, NY 10036		Emphasis on perceptual training. Outlines different levels or perceptual development in terms of age and visuomotor task expected. Detailed activities to develop auditory memory, visual memory, auditory discrimination, color discrimination, visual perception, visuomotor coordination. Pre-school and elementary ages.
Word Games-Revised	Science Research Assoc.		Kit of word games with paper for playing. Good ideas for auditory discrimination, visual-auditory memory, spelling practice. Child must be able to read for majority of games. Can be used for vocabulary building, children and adults ages 8-up.
Let's Listen	Educational Activities, Inc. P.O. Box 392 Freeport, NY 11520		Record. Introduction of musical and nonmusical sounds, classification of musical and nonmusical sounds and listening and training in pitch discrimination.
Riddle-Riddle Rhyme Time Kits A and B	Dexter & Westbrook, LTD. 111 S. Center Ave. Rockville Center, NY 11571		Set of riddles can be used quite effectively in articulation therapy combining a language development approach. Ages 8 and up.
Sound Tunes by "Sparky" K-2	Educational Activities, Inc.		Activity Records. Good for articulation training. Sounds and articulatory movements involved in production are integrated in musical tunes.
Speech Is Fun For Everyone	Fearon Publishers, Inc.		Illustrated practice books for basic speech and phonics sounds, eg. v for vaccum cleaner which buzzes vvv... Good for auditory discrimination and auditory-visual memory activities.
Talking Time Series	Webster Division, McGraw Hill Co.	$ 49.00	These sixteen color filmstrips building speaking skills. Set I contains the p and b sounds, the t and d sounds, the m, n, and ng sounds, the f and v sounds, the wh, w and h sounds. Set II includes the k and g sounds, the th sounds, the sh sounds, and ch and j sounds, the s and z sounds, the r sound and the l sound.

TITLE	SOURCE	PRICE	PUBLISHER'S DESCRIPTION
What's the Meaning of This?	Mafex	$ 2.95	Each lesson revolved around a common element providing a sense of security and serving as a springboard for word attack. Terms are introduced from fields as diverse as: history, sports, the arts, science, and the home.
Goldman-Lynch Sounds & Symbols Development Kit	American Guidance Service, Inc.	$117.00	This program, designed for children 4 1/2-9, is a complete program of activities and materials designed to stimulate production of the speech sounds and recognition of their associated symbols. The program is based on the concept that an awareness of speech sounds can best be developed in children through a combination of visual and auditory stimulation.
Resource Aid of Speech & Language Materials for Development of Communicative Skills	New England SEIMC	none listed	This examines and classifies the diagnostic materials for speech and language development.
Speech Improvement for the Trainable Retarded	Michigan State University	none listed	This book of activities and corresponding student activitity book has been designed for use by the classroom trainable mentally retarded teacher. The lessons follow a definite plan and are short.
Learning to Develop Language Skills Kit	Lakeshore Equipment Co. 1144 Montague Ave. San Leandro, CA 94577		This unit contains materials coordinated for use by individuals or small groups with emphasis on developing sequential, associative, and expressive language skills. Pets, farm and wild animals, the family, community workers, and their jobs, the seasons, all are used in games, books, illustrations, etc., to enrich verbal expression and improve labeling skills, plus providing basis for story telling, role-playing.
High Interest Teaching System (HITS)	HITS San Juan Capistrano, CA 92675	$ 50.00	The Format: Hits uses a contemporary rock radio station format for narration of verbal instruction. Word analysis, vocabulary development and comprehension are taught in the context of popular music in a self-administered program consisting of an audio tape and an instructional workbooklet. Each tape has an original rock recording. The Program: Students learn how to read the words in each song through a carefully programmed instructional booklet designed to teach a specific hierarchy of important reading skills at each Hits level. Skills that are introduced at one level are repeated and extended at subsequent levels with increasing depth and sophistication. The programmed format of the instructional

TITLE	SOURCE	PRICE	PUBLISHER'S DESCRIPTION
High Interest Teaching Systems (HITS) (continued)			booklet affords the student the security of a highly success oriented program. The major categories included at each level of the Hits program are Word Analysis, Vocabulary Development and Comprehension. At beginning levels emphasis is on word analysis skills while comprehension and vocabulary development are emphasized at later levels. The four Hits levels approximate word analysis skills of grades 2-6. (Level 1 grade 2-3; Level 2 grades 3-4; Level 3 grades 4-5; Level 4 grades 5-6).
Peabody Language Development Kits Level #P	American Guidance Service, Inc.	$192.00	Level #P is appropriate for slow and disadvantaged kindergarten children, school-aged trainable retardates, lower-primary educable mentally retarded children, and for average and above 3 and 4 year old pre-kindergarten children. The large number of exciting materials in this level make extensive use of the tactual and visual modes of stimulation. Children first develop "labeling language" and then move into an emphasis on the snytactical and grammatical structure of language, followed by the stimulation of logical thinking.
Peabody Language Development Kits Level #1	American Guidance Service	$ 74.00	Level #1, Mental Ages 4 1/2 - 6 1/2. This level is appropriate for slower and disadvantaged, first grade retarded children, intermediate trainable retarded children, and average and above kindergarten children. Level #1 continues a balance of both oral language and intellectual stimulation. However, more auditory and visual stimuli are used with fewer tactual materials being provided.
Level #2		$ 88.00	Mental Ages 6-8. Level #2 should be used with disadvantaged and slow learning second grade children, average and above first grade children, intermediate special class educable retarded children, and trainable retarded adolescents. An increased emphasis on stimulation of the intellect marks this level. Brainstorming, problem solving, and similar activities are sequenced in to stimulate divergent thinking.
Level #3		$ 66.00	Mental Ages 7 1/2 - 9 1/2. Level #3 is appropriate for slower and disadvantaged grade-three children, educable mentally retarded pupils in upper intermediate special classes, and average and above second grade children. In this level an even greater emphasis is placed on the stimulation of all facets of the intellect. Ideas and concepts, their formulation and manipulation, become the basis for many activities. Creativity is encouraged throughout the activities.

TITLE	SOURCE	PRICE	PUBLISHER'S DESCRIPTION
Goal: Language Development	Learning Business Inc. Westlake Executive Ctr. 790 Hampshire Rd. Suite C Westlake Village, CA 91360	$100.00	The language processing skill areas covered by the program include Auditory Reception (35 lessons), Visual Reception (35 lessons), Visual Association (35 lessons), Verbal Expression (47 lessons), Auditory Sequential Memory (23 lessons) Visual Sequential Memory (35 lessons) Gramatic Closure (23 lessons), Auditory Closure (11 lessons), Auditory Association (47 lessons), Manual Expression (35 lessons), Visual Closure (11 lessons). Authored by Dr. Merle B. Karnes, Goal: Language Development is a program of model lessons for children 3-5 years old. Designed and tested over a 7 year period, it will help children in kindergarten, day care and nursery schools develop the language skills basic to learning to read. 337 lesson plans, a 36 page teacher's guide and 9 units of supportive instructional materials based on the game format are included in the program. Each lesson plan includes a learning objective, a list of required materials, a detailed procedure for teaching the lesson and a criterion activitiy to test for desired results.
The MWM Program for Developing Language Abilities	Childcraft Education Corp. 20 Kilmer Road Edison, NJ 08817	$195.00 complete program	Authors: Ester H. Minskoff, Ph.D., Douglas E. Wiseman, Ed.D., J. Gerald Minskoff, Ed.D. The MWM Program features a 3 step approach: Diagnosis of the child's learning disabilities, Remediation of the identified learning disabilities, evaluation of the child's learning abilities after the remediation has been given. The MWM Program is a structured and self-contained teaching/learning instrument, uniquely designed with separate methodology for remedial or developmental uses. Designed by 3 nationally recognized educators trained in the fields of Learning Disabilities and Mental Retardation, this innovative program is structured within the 12 areas of language development contained in the Illinois Test of Psycholinguistic Abilities. (ITPA) Remedial Use: One use of the MWM Program is to remediate learning disabilites in each of 12 language areas. This remediation is appropriate for children functioning between the Language Ages of 3 to 7 in their disability area, although their Chronological Ages may range from 5 to 10 or higher. Developmental Use: The MWM Program can be used developmentally in the regular classroom with children ages 3 through 7. In this case, the teacher would use alternate teaching strategies that are built around three language clusters. These strategies guide the teacher step-by-step through this equally effective, group oriented use of the MWM Program. Systematic teaching activities are arranged in a carefully graduated

TITLE	SOURCE	PRICE	PUBLISHER'S DESCRIPTION
The MWM Programs for Developing Language Abilities (continued)			sequence and may be used to develop language proficiency for an entire class. There are 4 major components in the MWM Program: Teacher's Guide, Inventory of Language Abilities, 6 Teaching Manuals and Various Teaching Materials.
Fokes Sentence Builder	Teaching Resources Corporation 100 Boylston St. Boston, Mass. 02116	$ 43.00	The program provides a structured approach to teaching rules of grammar. The materials include five color-coded boxes of cards that represent five different grammatical categories of words: WHO, WHAT, IS DOING, WHICH,and WHERE. From two to five boxes at a time are placed on a Sentence Line. The students select cards from the boxes and arrange them on the Sentence Line to create sentences that adhere to grammatical rules. Application and Use: The program is designed for use by classroom teachers and language therapists. Instruction may be given individually or in small groups. To facilitate planning, the guide presents sentence types in three major sections: Building Declarative Sentences, Building Questions, and Building Negative Sentences. The lessons in each section are arranged in order of their linguistic complexity and generally reflect the developmental order in which children acquire language. In order to follow the natual progression of children's language development, the teacher or therapist need only select lessons from all three sections simultaneously and sequentially. In addition, specific sequences of lessons are suggested for children with language delays.
Sound/Order/Sense (SOS)	Follett Publishing Co.	Level 1-$ 27.00 Level 2-$ 27.00 Pupil Response Books $ 1.14 ea	SOS is a developmental program for auditory perception for the primary grades that teaches children to listen for: sound (the sounds that make up speech) order (the sequence of sounds in words and words in groups) and sense (the attributes that give meaning to words). The two sequentially developed levels follow the same format. Level 1 is recommended for first grade, Level 2 is recommended for use after completion of Level 1. SOS also provides essential training for older children who have auditory perceptual difficulties. Two Pupil's Response Books are essential for use with each level of the program. SOS is designed for use in daily 20 minute lessons. The group activities are presented on 160 activity cards included in each kit. The cards are color-coded to provide auditory developmental activities in the areas of: awareness, focus, figure-ground, discrimination, sequencing, scanning and meaning.

TITLE	SOURCE	PRICE	PUBLISHER'S DESCRIPTION
Spacetalk	Individualized Instruction Inc. P.O. Box 25308 Oklahoma City, OK 73125	$232.00	Spacetalk is an individualized, multipurpose auditory training program designed specifically for speech improvement and reading readiness. Techniques of auditory training are used in the systematic four-step procedure of each lesson which provides the needed skills for speech improvement. The story format is used to develop association, comparision analysis, and synthesis of speech sounds.
Improving Speech Patterns	Educational Research, Inc. 2916 Independence Ave. Shreveport, LA 71109	$ 90.00	A 24 lesson cassette tape program that presents the 17 consonant sounds in the initial, medial, and final positions, the voiceless and voiced sounds of "th" and the digraphs "sh" and "ch". Includes the identification of speech organs, tongue exercises, and an inservice lesson for the classroom teacher with suggested speech improvement activities. The program is appropriate for individual children who are experiencing some delay or difficulty in oral communication, as a preventive measure with quite young children, and for reading readiness because of the emphasis on sound discrimination. The program is also good for remedial use with certain students whose backgrounds and environments cause them to use a non-standard English.

APPENDIX C
Form I
Individual Education Program: Total Service Plan

School District Name and Number _____

School Building _____

Name of Student _____

Date of Birth _____ Age _____ Grade _____

*Hours per week in regular classroom _____

Child Study Team Members Present

Signature	Position	Signature	Position

Date of Child Study Team Meeting _____

SUMMARY OF PRESENT LEVELS OF STUDENT PERFORMANCE:

A. Audiometric screening results: _____
B. Oral Peripheral Examination results: _____
C. Articulatory Proficiency Assessment results: _____
D. Language Proficiency Assessment results: _____
E. Assessment of other areas:
   1. Voice: _____
   2. Rhythm: _____
   3. Specific components of language: _____
   4. Other: _____

DESCRIPTION OF PLACEMENT RECOMMENDATION: _____

DATE OF ENTRY INTO PROGRAM: _____ PROJECTED ENDING DATE: _____

PERIODIC REVIEW DATES: _____

_____ _____
Signature of person completing IEP form Date

*May wish to substitute group/individual therapy and length/frequency of sessions.

LAKE GREENWOOD PROJECT
Speech Individual Educational Program:
Instructional Plan for Speech Improvement/Language Development

Program Goals and Instructional Objectives	Content (Strategy)	Procedure	Resources and/or Materials	Date Started	Mastery of Obj.	Objective Evaluation Criteria
I. To introduce child in correct production of speech sounds and give him practice in correct production.	1. Sound discrimination 2. Sound practice	see attached sheet	Goldman-Lynch Sounds and Symbols Developmental Kit			
II. The child will recognize the visual symbols for the sounds introduced.	1. Sound symbol association 2. Sound symbol discrimination					
III. The child will understand and use the sounds of the language in their various relationships in words, sentences, and conversational speech.	1. Sound symbol sequencing 2. Sound sequencing 3. Sound symbol synthesis 4. Sound synthesis 5. Sound symbol analysis 6. Sound analysis					

GOLDMAN-LYNCH SOUNDS & SYMBOLS DEVELOPMENT PROGRAM

Lesson 1 - Objectives

1. To introduce the character High Hat.
2. To help children become aware of the significance of visual symbols.
3. To introduce left-to-right progression of visual symbols.

Lesson 2 - Objectives

1. To introduce the m sound and symbol.
2. To introduce the task of auditory and visual discrimination of sounds and symbols.
3. To develop the concept of likenesses and differences in pictures and symbols.

Lesson 3 - Objectives

1. To introduce the e sound and symbol.
2. To teach discrimination between the m and e sounds and symbols.
3. To introduce the concept of sound sequencing.

Lesson 14 - Objectives

1. To introduce the s sound and symbol.
2. To show correct production of the s sound in the initial and final positions of syllables.
3. To review sound synthesis, sound analysis, and sound sequencing skills in syllables and words.

Lesson 50 - Objectives

1. To introduce the r sound and symbol.
2. To practice sound discrimination between the w and r sounds.
3. To practice correct production of the r sound in syllables and words.
4. To review correct production of the y, l, sh, and th sounds in words.

Lesson 64 - Objectives

1. To review all the sounds and symbols.
2. To practice recognition of correct and incorrect production of the s and sh sounds in contextual speech.
3. To practice correct production of difficult consonant sounds in words and sentences.
4. To teach the sound variation for the c symbol.

APPENDIX C
Form II
Group Instructional Plan
Speech Improvement/Language Development

Name of School _____ Grade_____Date _____

Teacher's Name_____ Clinician's Name _____

Date Program Initiated _____ Sessions: Length_____Frequency _____

SI/LD Development Program Model: (check as appropriate) Direct Service _____

Consultant_____(Classroom based _____Other-than-classroom based _____)

Team Teaching_____(Classroom based _____ Other-than-classroom based _____)

Names of Pupils Participating:		Program Goals
1.	11.	
2.	12.	
3.	13.	
4.	14.	
5.	15.	
6.	16.	
7.	17.	
8.	18.	
9.	19.	
10.	20.	

PROGRAM OBJECTIVES	ACTIVITIES	MATERIALS/ EQUIPMENT/ MEDIA	DATE BEGAN	DATE COMPLETED	EVALUATION

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